PAGE 1 / 59

Image# 201604209014509515

FEC FORM 3X

# REPORT OF RECEIPTS AND DISBURSEMENTS

FORM 3X   F	or Other Than An Authorized Committee	Office Use Only
1. NAME OF COMMITTEE (in full)	TYPE OR PRINT ▼ Example: If typing, type over the lines.	12FE4M5
National Association of	Mutual Insurance Companies PAC	
ADDRESS (number and street)  Check if different	PO Box 68700	
than previously reported. (ACC)	Indianapolis	IN 46268
2. FEC IDENTIFICATION NU	IMBER ▼ CITY ▲	STATE ▲ ZIP CODE ▲
C C00170258	3. IS THIS REPORT X (N) O	R AMENDED (A)
4. TYPE OF REPORT (Choose One)  (a) Quarterly Reports:	(b) Monthly Report Due On: Feb 20 (M2) May 20 (M2)  Mar 20 (M3) Jun 20 (M3)  X Apr 20 (M4) Jul 20 (M3)	(Non-Election Year Only)  Sep 20 (M9)  Dec 20 (M12) (Non-Election Year Only)
April 15 Quarterly Report (Q July 15 Quarterly Report (Q October 15 Quarterly Report (Q January 31 Year-End Report (Y)	Primary (12P)  PRE-Election Report for the: Convention (12C)  3)	General (12G) Runoff (12R)  Special (12S)  In the State of
July 31 Mid-Year Report (Non-election Year Only) (MY)  Termination Report (TER)	(d) 30-Day  POST-Election Report for the:  Election on	Runoff (30R)  Special (30S)  in the State of
5. Covering Period 03	01 2016 through 03	M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
·	is Report and to the best of my knowledge and belief it is	true, correct and complete.
Type or Print Name of Treasurer	Mr. Gregg A. Dykstra J.D.	
Signature of Treasurer Mr. G	iregg A. Dykstra J.D. [Electronically Filed]	Date 04 / 20 / 2016
NOTE: Submission of false, errone	eous, or incomplete information may subject the person signin	ng this Report to the penalties of 2 U.S.C. §437g.
Office Use Only		FEC FORM 3X Rev. 12/2004

### SUMMARY PAGE

OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 02/2003)

Page 2

The or Type Committee Name

Write or Type Committee Name National Association of Mutual Insurance Companies PAC 03 01 2016 03 2016 Report Covering the Period: 31 From: To: **COLUMN A COLUMN B** This Period Calendar Year-to-Date (a) Cash on Hand 94271.84 January 1, 2016 (b) Cash on Hand at 95214.29 Beginning of Reporting Period..... 47848.10 117490.30 (c) Total Receipts (from Line 19) ..... (d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 211762.14 143062.39 6(a) and 6(c) for Column B)..... 81842.86 150542.61 Total Disbursements (from Line 31)...... Cash on Hand at Close of 8. Reporting Period 61219.53 61219.53 (subtract Line 7 from Line 6(d))..... Debts and Obligations Owed TO the Committee (Itemize all on 0.00 Schedule C and/or Schedule D) ..... 10. Debts and Obligations Owed BY the Committee (Itemize all on 0.00 Schedule C and/or Schedule D) .....

×

This committee has qualified as a multicandidate committee. (see FEC FORM 1M)

#### For further information contact:

Federal Election Commission 999 E Street, NW Washington, DC 20463

Toll Free 800-424-9530 Local 202-694-1100

#### **DETAILED SUMMARY PAGE**

of Receipts

FEC Form 3X (Rev. 06/2004)

Write or Type Committee Name

### National Association of Mutual Insurance Companies PAC

		COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
(	Contributions (other than loans) From:	1	
	a) Individuals/Persons Other		
	Than Political Committees	07440.05	
	(i) Itemized (use Schedule A)	27118.35	63037.53
	(ii) Unitemized	18146.17	43680.25
	(iii) TOTAL (add		
	Lines 11(a)(i) and (ii)▶	45264.52	106717.78
(	b) Political Party Committees	0.00	0.00
,	c) Other Political Committees		
`	(such as PACs)	2500.00	9500.00
(	d) Total Contributions (add Lines		
	11(a)(iii), (b), and (c)) (Carry		
	Totals to Line 33, page 5)▶	47764.52	116217.78
	ransfers From Affiliated/Other		
F	Party Committees	0.00	0.00
. /	II Loans Received	0.00	0.00
	oan Repayments Received	0.00	0.00
	Offsets To Operating Expenditures	7	7 7 7
	Refunds, Rebates, etc.)		
	Carry Totals to Line 37, page 5)	79.27	261.06
	Refunds of Contributions Made		
t	Federal Candidates and Other		
F	Political Committees	0.00	0.00
. (	Other Federal Receipts		
(	Dividends, Interest, etc.)	4.31	1011.46
	ransfers from Non-Federal and Levin Funds	, , , , , , , , , , , , , , , , , , , ,	
(	a) Non-Federal Account		
	(from Schedule H3)	0.00	0.00
(	b) Levin Funds (from Schedule H5)	0.00	0.00
	c) Total Transfers (add 18(a) and 18(b))	0.00	0.00

#### **DETAILED SUMMARY PAGE**

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
. Operating Expenditures: — (a) Allocated Federal/Non-Federal		
Activity (from Schedule H4)	0.00	0.00
(i) Federal Share		
(ii) Non-Federal Share	0.00	0.00
(b) Other Federal Operating	342.86	542.61
Expenditures(c) Total Operating Expenditures	342.00	342.01
(add 21(a)(i), (a)(ii), and (b))▶	342.86	542.61
. Transfers to Affiliated/Other Party	0.00	0.00
Committees	0.00	0.00
Federal Candidates/Committees and Other Political Committees	80500.00	146000.00
Independent Expenditures		
(use Schedule E)	0.00	0.00
(2 U.S.C. §441a(d)) (use Schedule F)	0.00	0.00
(add deficult i )		0.00
Loan Repayments Made	0.00	0.00
Loans Made	0.00	0.00
Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees	0.00	0.00
	0.00	0.00
(b) Political Party Committees(c) Other Political Committees	0.00	0.00
(such as PACs)	0.00	0.00
(d) Total Contribution Defineds		
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c))▶	0.00	0.00
(433 2.1100 2.5(4), (5), 4.14 (5),		
. Other Disbursements	1000.00	4000.00
Federal Election Activity (2 U.S.C. §431(20))		
(a) Allocated Federal Election Activity		
(from Schedule H6)		
(i) Federal Share	0.00	0.00
(ii) "Levin" Share	0.00	0.00
(b) Federal Election Activity Paid Entirely		
With Federal Funds	0.00	0.00
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))▶	0.00	0.00
Enico co(a)(ii), co(a)(ii) and co(b))	7	7 7
Total Disbursements (add Lines 21(c), 22,		
23, 24, 25, 26, 27, 28(d), 29 and 30(c))	81842.86	150542.61
Total Federal Disbursements		
(subtract Line 21(a)(ii) and Line 30(a)(ii)		
from Line 31)	81842.86	150542.61

#### **DETAILED SUMMARY PAGE**

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

1 20 1 01111 0X (1101: 02/2000)	1 LO 1 61111 3X (11ev. 02/2003)					
III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date				
3. Total Contributions (other than loans) (from Line 11(d), page 3)	47764.52	116217.78				
4. Total Contribution Refunds (from Line 28(d))	0.00	0.00				
5. Net Contributions (other than loans) (subtract Line 34 from Line 33)	47764.52	116217.78				
6. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))▶	342.86	542.61				
7. Offsets to Operating Expenditures (from Line 15, page 3)	79.27	261.06				
8. Net Operating Expenditures (subtract Line 37 from Line 36)	263.59	281.55				

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE	-	PAGE	6 OF	59		
	(check only	one)					
	X 11a	11b	11c	12			
	13	14	15	16	17		
not be sold or used by any person for the purpose of soliciting contributions							

	d Statements may not be sold or used by any pers the name and address of any political committee to				
NAME OF COMMITTEE (In Full)	Lineary Control in 200				
National Association of Mutua	i insurance Companies PAC				
Full Name (Last, First, Middle Initial)  A. Mr. Neil Alldredge		Date of Receipt			
Mailing Address PO Box 68700		03 23 _ 2016 _			
City Indianapolis	State Zip Code IN 46268-0700	Transaction ID : AC7045C6B07D24FC1A2			
FEC ID number of contributing federal political committee.	C	Amount of Each Receipt this Period 40.00			
Name of Employer	Occupation Sonior Vice President State and Poli	Memo Item			
National Association of Mutual Insuran  Receipt For:  Primary General  Other (specify) ▼	Senior Vice President - State and Poli  Aggregate Year-to-Date ▼  240.00				
Full Name (Last, First, Middle Initial)  3. Mr. Neil Alldredge		Date of Receipt			
Mailing Address PO Box 68700	State Zip Code	03 31 2016 Transaction ID : A8C2935BBFD5943D683F			
Indianapolis	IN 46268-0700	Amount of Each Receipt this Period			
FEC ID number of contributing federal political committee.	С	40.00			
Name of Employer National Association of Mutual Insuran	Occupation Senior Vice President - State and Poli	Memo Item			
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼  280.00				
Full Name (Last, First, Middle Initial)  Mr. Scott L. Arenholz		Date of Receipt			
Mailing Address PO Box 64		03 31 2016			
City Red Oak	State Zip Code IA 51566-0064	Transaction ID : A6486C3576D4C4995827  Amount of Each Receipt this Period			
FEC ID number of contributing federal political committee.	C	250.00			
Name of Employer	Occupation	Memo Item			
Pioneer Mutual Insurance Association	President				
Receipt For:  Primary  General	Aggregate Year-to-Date ▼				
Other (specify)	250.00				
SUBTOTAL of Receipts This Page (optional)		330.00			
(uplicital).					
TOTAL This Period (last page this line number	er only)				

FOR LINE NUMBER: **PAGE** 7 OF 59 Use separate schedule(s) (check only one) for each category of the X 11a 11b 12 11c Detailed Summary Page 14 13 15 16

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) National Association of Mutual Insurance Companies PAC Full Name (Last, First, Middle Initial) Mr. Joseph J. Babiak Date of Receipt Mailing Address 404 E Woodlawn Ave 2016 City Zip Code State Transaction ID: A2A61D043CEFF473D9F0 Hastings MI 49058-1005 Amount of Each Receipt this Period FEC ID number of contributing 500.00 federal political committee. Memo Item Name of Employer Occupation President & CEO Hastings Mutual Insurance Company Receipt For: Aggregate Year-to-Date ▼ Primary General 500.00 Other (specify) Full Name (Last, First, Middle Initial) B. Mr. John S. Benson Date of Receipt Mailing Address 1 Mutual Ave 03 2016 11 City State Zip Code Transaction ID: A60F7675ED6644CA983D Frankenmuth MI 48787-1000 Amount of Each Receipt this Period FEC ID number of contributing 116.00 federal political committee. Memo Item Name of Employer Occupation Frankenmuth Mutual Insurance Company Chairman & CEO Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) 580,00 Full Name (Last, First, Middle Initial) c. Mr. John S. Benson Date of Receipt Mailing Address 1 Mutual Ave 03 25 2016 City Zip Code State Transaction ID: A1313772E6A5843488DE MI Frankenmuth 48787-1000 Amount of Each Receipt this Period FEC ID number of contributing С 116.00 federal political committee. Memo Item Name of Employer Occupation Chairman & CEO Frankenmuth Mutual Insurance Company Receipt For: Aggregate Year-to-Date ▼ Primary General 696.00 Other (specify) 732.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only)..... 9

FEC ID number of contributing

Western National Mutual Insurance Comp

federal political committee.

Name of Employer

	FOF	R LINE	NU	MBER	:	PAGE	-	8	OF	5	59
Use separate schedule(s)	(che	ck only	or	ne)							
for each category of the Detailed Summary Page	×	11a		11b		11c		12			
		13		14		15		16	Γ		17

Memo Item

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) National Association of Mutual Insurance Companies PAC Full Name (Last, First, Middle Initial) Mr. Arlen Briggs Date of Receipt Mailing Address 550 Eisenhower Rd 24 2016 City State Zip Code Transaction ID: AA30DA82C75C34E1E90D KS Leavenworth 66048-1190 Amount of Each Receipt this Period FEC ID number of contributing C 250.00 federal political committee. Memo Item Name of Employer Occupation Chief Financial Officer Armed Forces Insurance Exchange Receipt For: Aggregate Year-to-Date ▼ Primary General 250.00 Other (specify) Full Name (Last, First, Middle Initial) B. Mr. John Buckley Date of Receipt Mailing Address 5350 W 78th St 03 14 2016 City State Zip Code Transaction ID: A7BA01523711E420BAD9 MN Edina 55439-3101 Amount of Each Receipt this Period

Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼  250.00	
Full Name (Last, First, Middle Initial) Mr. Scott Carmack Mailing Address 1510 N Elms Rd		Date of Receipt  03  03  03  03  03
City Flint  FEC ID number of contributing federal political committee.  Name of Employer	State Zip Code MI 48532-2033  C Occupation	Transaction ID : AD64F6720984F4660902  Amount of Each Receipt this Period  300.00  Memo Item
Pioneer State Mutual Insurance Company Receipt For: Primary General Other (specify)	Vice President of Underwriting  Aggregate Year-to-Date ▼  300.00	
SUBTOTAL of Receipts This Page (optional)	<b>&gt;</b>	800.00

Occupation

TOTAL This Period (last page this line number only).....

Director of Legal Services

250.00

Harana and a sala dala (a)					MBER	:	PAGE	9	OF	ţ	59
Use separate schedule(s) for each category of the	(0	he	ck only	or	ne)	_					
Detailed Summary Page		<u>×</u>	11a		11b		11c	12			
, ,			13		14		15	16			17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) National Association of Mutual Insurance Companies PAC Full Name (Last, First, Middle Initial) Mr. Charles M. Chamness Date of Receipt Mailing Address PO Box 68700 04 2016 City Zip Code State Transaction ID: AC52B5877ED6F4465B3C Indianapolis IN 46268-0700 Amount of Each Receipt this Period FEC ID number of contributing 90.00 federal political committee. Memo Item Name of Employer Occupation President & CEO National Association of Mutual Insuran Receipt For: Aggregate Year-to-Date ▼ Primary General 450.00 Other (specify) Full Name (Last, First, Middle Initial) B. Mr. Charles M. Chamness Date of Receipt Mailing Address PO Box 68700 03 23 2016 City State Zip Code Transaction ID: AB3ED988CCF2447BEAA0 IN Indianapolis 46268-0700 Amount of Each Receipt this Period FEC ID number of contributing 90.00 federal political committee. Memo Item Name of Employer Occupation National Association of Mutual Insuran President & CEO Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) 540,00 Full Name (Last, First, Middle Initial) c. Mr. Charles M. Chamness Date of Receipt Mailing Address PO Box 68700 03 31 2016 City Zip Code State Transaction ID: ADF92DEF0D0BB4740B41 IN Indianapolis 46268-0700 Amount of Each Receipt this Period FEC ID number of contributing С 90.00 federal political committee. Memo Item Occupation Name of Employer President & CEO National Association of Mutual Insuran Receipt For: Aggregate Year-to-Date ▼ Primary General 630.00 Other (specify) 270.00 SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

### SCHEDULE A (FEC Form 3X)

	FOR LINE NUMBER: PAGE 10 OF 59										59	
Use separate schedule(s)		(check only one)										
for each category of the Detailed Summary Page		X	11a		11b		11c		12			
			13		14		15		16			17
not be sold or used by any person for the purpose of soliciting contributions dress of any political committee to solicit contributions from such committee.												

IT	EMIZED RECEIPTS		for each category of the Detailed Summary Page	X   11a
	y information copied from such Reports and S for commercial purposes, other than using the			erson for the purpose of soliciting contributions to solicit contributions from such committee.
$\setminus$	NAME OF COMMITTEE (In Full)  National Association of Mutual	Insurance	e Companies PAC	
Α.	Full Name (Last, First, Middle Initial)  Ms. Julianne Chapman  Mailing Address 1510 N Elms Rd  City Flint  FEC ID number of contributing federal political committee.  Name of Employer  Pioneer State Mutual Insurance Company  Receipt For:  Primary General Other (specify)		Zip Code 48532-2033  n ales & Marketing Year-to-Date ▼ 300.00	Date of Receipt  03 03 2016  Transaction ID: AA451400D432140AF875  Amount of Each Receipt this Period  300.00  Memo Item
В.	Full Name (Last, First, Middle Initial)  Mr. Christopher Cleveland  Mailing Address 1510 N Elms Rd  City Flint  FEC ID number of contributing federal political committee.  Name of Employer Pioneer State Mutual Insurance Company  Receipt For:  Primary General Other (specify)		Zip Code 48532-2033  Hent & Chief Actuary  Year-to-Date ▼  300.00	Date of Receipt  M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
C.	Full Name (Last, First, Middle Initial)  Mr. Mark Coe  Mailing Address PO Box 111  City  Bucyrus  FEC ID number of contributing federal political committee.  Name of Employer  Ohio Mutual Insurance Company  Receipt For:  Primary  General  Other (specify)	State OH  C  Occupation IT Manage Aggregate		Date of Receipt  03 31 2016  Transaction ID: A3A2D1B7CB43B4E00B60  Amount of Each Receipt this Period  39.00  Memo Item
S	UBTOTAL of Receipts This Page (optional)			639.00
Т	OTAL This Period (last page this line number	only)		

Use separate schedule(s)	FOR LINE NUMBER: PAGE 11 OF 5									
	(check only one)									
for each category of the Detailed Summary Page	X 11a 11b	11c 12								
,g.	13 14	15 16 17								
not be sold or used by any person for the purpose of soliciting contributions dress of any political committee to solicit contributions from such committee.										

Any information copied from such Reports and Statements may or for commercial purposes, other than using the name and add NAME OF COMMITTEE (In Full) National Association of Mutual Insurance Companies PAC Full Name (Last, First, Middle Initial) Mr. William Comstock Date of Receipt Mailing Address 1510 N Elms Rd 03 2016 City State Zip Code Transaction ID: A8C56F5452EC74CA695F 48532-2033 MI Flint Amount of Each Receipt this Period FEC ID number of contributing C 250.00 federal political committee. Memo Item Name of Employer Occupation Pioneer State Mutual Insurance Company Liberty Claims Manager Receipt For: Aggregate Year-to-Date ▼ Primary General 250.00 Other (specify) Full Name (Last, First, Middle Initial) B. Mr. Dan Czmer Date of Receipt Mailing Address 6055 Byram Lake Dr 03 03 2016 City State Zip Code Transaction ID: AD7D8F272049B443C91C Linden MΙ 48451-8784 Amount of Each Receipt this Period FEC ID number of contributing 300.00 federal political committee. Memo Item Name of Employer Occupation Pioneer State Mutual Insurance Company Director Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) 300.00

Cities (speedly) •	500,00	
Full Name (Last, First, Middle Initial)  Mr. Jack D'Arcy		Date of Receipt
Mailing Address 6603 Cooper Rd		03 03 2016
City	State Zip Code	Transaction ID : A611BD20A5F2648F1A37
Marlette	MI 48453-9753	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	300.00
rederal political committee.		
Name of Employer	Occupation	Memo Item
Pioneer State Mutual Insurance Company	Director	
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00	

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

C.

850.00

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:						PAGE	· ′	12	OF		59
	(0	(check only one)										
		X	11a		11b		11c		12			
			13		14		15		16			17
not be sold or used by any person for the purpose of soliciting contributions dress of any political committee to solicit contributions from such committee.												

Any information copied from such Reports and Statements may or for commercial purposes, other than using the name and add NAME OF COMMITTEE (In Full) National Association of Mutual Insurance Companies PAC Full Name (Last, First, Middle Initial) Mr. Michael Davis Date of Receipt Mailing Address 1430 Manistee Dr 03 2016 City State Zip Code Transaction ID: A6780D58B1B1345ECBC5 MI **Grand Blanc** 48439-2505 Amount of Each Receipt this Period FEC ID number of contributing 300.00 federal political committee. Memo Item Name of Employer Occupation Pioneer State Mutual Insurance Company Director Receipt For: Aggregate Year-to-Date ▼ Primary General 300.00 Other (specify) Full Name (Last, First, Middle Initial) B. Mr. Dan DeArment Date of Receipt Mailing Address PO Box 646 03 21 2016 City State Zip Code Transaction ID: AB327D101BAA64FEB826 Bedford PA 15522-0646 Amount of Each Receipt this Period FEC ID number of contributing 350.00 federal political committee. Memo Item Name of Employer Occupation Friends Cove Mutual Insurance Company President/CEO Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) 1050.00 Full Name (Last, First, Middle Initial) c. Mr. Rick DeGraw Date of Receipt Mailing Address 3030 N 3rd St 07 03 2016 City State Zip Code Transaction ID: A49154B4A05F54D4286E ΑZ Phoenix 85012-3074 Amount of Each Receipt this Period FEC ID number of contributing C 41.66 federal political committee. Memo Item Name of Employer Occupation Executive Vice President & Chief Admin CopperPoint Mutual Insurance Company Receipt For: Aggregate Year-to-Date ▼ Primary General 208.30 Other (specify) 691.66 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

FEC ID number of contributing

federal political committee.

Name of Employer

TOTAL This Period (last page this line number only).....

Indianapolis

mage# 201604209014509527			
SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 13 OF 59 (check only one)    X   11a
			person for the purpose of soliciting contributions et to solicit contributions from such committee.
NAME OF COMMITTEE (In Full)  National Association of Mutua	ıl Insurance	e Companies PAC	
Full Name (Last, First, Middle Initial)  Mr. Rick DeGraw  Mailing Address 3030 N 3rd St			Date of Receipt
City Phoenix	State AZ	Zip Code 85012-3074	03
FEC ID number of contributing federal political committee.	С		41.66
Name of Employer	Occupation	1	Memo Item
CopperPoint Mutual Insurance Company	Executive \	Vice President & Chief Admin	
Receipt For:  Primary General  Other (specify) ▼	Aggregate	Year-to-Date ▼  249.96	
Full Name (Last, First, Middle Initial)  Mr. Robert Detlefsen PhD			Date of Receipt
Mailing Address PO Box 68700			03 04 2016
City	State	Zip Code	Transaction ID: ABC3F14E426F84160A74
Indianapolis	IN	46268-0700	Amount of Each Receipt this Period

Amount of Each Receipt this Period

Memo Item

43.48

National Association of Mutual Insuran Vice President - Public Policy Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) 217.40 Full Name (Last, First, Middle Initial) c. Mr. Robert Detlefsen PhD Date of Receipt Mailing Address PO Box 68700 23 2016 03 City State Zip Code Transaction ID: AA910BF8328F143CCA0A IN 46268-0700 Indianapolis Amount of Each Receipt this Period FEC ID number of contributing C 43.48 federal political committee. Memo Item Name of Employer Occupation Vice President - Public Policy National Association of Mutual Insuran Receipt For: Aggregate Year-to-Date ▼ Primary General 260.88 Other (specify) 128.62 SUBTOTAL of Receipts This Page (optional).....

C

Occupation

Image# 201604209014509528		
SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 14 OF 59 (check only one)    X   11a
Any information copied from such Reports and Statements ma or for commercial purposes, other than using the name and ac		
NAME OF COMMITTEE (In Full)  National Association of Mutual Insurance	Companies PAC	
Full Name (Last, First, Middle Initial)  Mr. Robert Detlefsen PhD		Date of Receipt

National Association of Mutual	Insurance Companies PAC	
Full Name (Last, First, Middle Initial)  Mr. Robert Detlefsen PhD  Mailing Address PO Box 68700		Date of Receipt  M = M / D = D / Y = Y = Y = Y = Y = Y = Y = Y = Y = Y
City Indianapolis  FEC ID number of contributing federal political committee.  Name of Employer  National Association of Mutual Insuran  Receipt For:  Primary General  Other (specify) ▼	State Zip Code IN 46268-0700  C  Occupation Vice President - Public Policy  Aggregate Year-to-Date ▼  304.36	Transaction ID : A5AF020667A1D4FAE8CF  Amount of Each Receipt this Period  43.48  Memo Item
Full Name (Last, First, Middle Initial)  Mr. Gregg A. Dykstra J.D.  Mailing Address 3601 Vincennes Rd  City Indianapolis  FEC ID number of contributing federal political committee.  Name of Employer National Association of Mutual Insuran  Receipt For:  Primary General Other (specify)	State Zip Code IN 46268-1154  C  Occupation Chief Operating Officer  Aggregate Year-to-Date ▼  480.80	Date of Receipt  03 04 2016  Transaction ID: ABBA5059052494A368D5  Amount of Each Receipt this Period  96.16  Memo Item
Full Name (Last, First, Middle Initial)  Mr. Gregg A. Dykstra J.D.  Mailing Address 3601 Vincennes Rd  City Indianapolis  FEC ID number of contributing federal political committee.  Name of Employer  National Association of Mutual Insuran  Receipt For:  Primary  General  Other (specify)	State Zip Code IN 46268-1154  C  Occupation Chief Operating Officer  Aggregate Year-to-Date ▼  576.96	Date of Receipt  03 23 2016  Transaction ID : AB010065546CA4F3DA7A  Amount of Each Receipt this Period  96.16  Memo Item
	er only)	235.80

Image# 201604209014509529		
SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 15 OF 59 (check only one)  X 11a 11b 11c 12 15 16 17
Any information copied from such Reports and St or for commercial purposes, other than using the		
Name of committee (In Full)  National Association of Mutual II	nsurance Companies PAC	
Full Name (Last, First, Middle Initial)  Mr. Gregg A. Dykstra J.D.  Mailing Address 3601 Vincennes Rd		Date of Receipt
City Indianapolis	State Zip Code IN 46268-1154	Transaction ID : A6271F744D4504DCD990  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С	96.16
Name of Employer	Occupation	Memo Item
National Association of Mutual Insuran	Chief Operating Officer	
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 673.12	
Full Name (Last, First, Middle Initial)		Data of Receipt

National Association of Mutual Insuran	Chief Operating Officer	
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 673.12	
Full Name (Last, First, Middle Initial)  Mr. Fred A. Edmond Jr.  Mailing Address 1 Mutual Ave  City Frankenmuth  FEC ID number of contributing federal political committee.  Name of Employer Frankenmuth Mutual Insurance Company  Receipt For:  Primary General Other (specify)	State Zip Code MI 48787-1000  C  Occupation President & COO  Aggregate Year-to-Date ▼  385.00	Date of Receipt  03 11 2016  Transaction ID : ABF6941F5F7AF48C2E  Amount of Each Receipt this Period  77.00  Memo Item
Full Name (Last, First, Middle Initial)  Mr. Fred A. Edmond Jr.  Mailing Address 1 Mutual Ave  City	State Zip Code MI 48787-1000	Date of Receipt  03 25 2016  Transaction ID : A717449C7645142119
Frankenmuth  FEC ID number of contributing federal political committee.  Name of Employer  Frankenmuth Mutual Insurance Company  Receipt For:  Primary  General  Other (specify)	MI 48787-1000  C  Occupation President & COO  Aggregate Year-to-Date ▼  462.00	Amount of Each Receipt this Period  77.00  Memo Item
SUBTOTAL of Receipts This Page (optional)  TOTAL This Period (last page this line number	er only)	250.16

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:						PAGE	. ′	16 OF	59
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		X	11a		11b		11c		12	
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Any information copied from such Reports and St or for commercial purposes, other than using the		
NAME OF COMMITTEE (In Full)		
National Association of Mutual II	nsurance Companies PAC	
Full Name (Last, First, Middle Initial)  Ms. Pam Emmendorfer		Date of Receipt
Mailing Address 1510 N Elms Rd		03 03 2016
City	State Zip Code	Transaction ID : A203CA28289E74E68971
Flint	MI 48532-2033	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	300.00
Name of Employer	Occupation	Memo Item
Pioneer State Mutual Insurance Company	Vice President of Human Resources	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General  Other (specify) ▼	300.00	
Full Name (Last, First, Middle Initial)  3. Mr. Stephen F. Fabian		Date of Receipt
Mailing Address 200 N Main St		03 31 2016
City	State Zip Code	Transaction ID : A20745180E22646B68A9
Bel Air	MD 21014-3554	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С	83.34
Name of Employer	Occupation	Memo Item
Harford Mutual Insurance Company	Vice President, Chief Information Offi	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General  Other (specify) ▼	250.02	
Full Name (Last, First, Middle Initial) C. Mr. Michael L. Faron		Date of Receipt
Mailing Address 222 Ames St		03 22 2016
City Dedham	State Zip Code MA 02026-1850	Transaction ID : AF0E04F776FEE451D877
-	MA 02026-1850	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С	40.00
Name of Employer	Occupation	Memo Item
Norfolk & Dedham Mutual Fire Insurance	Commercial Lines Business Unit Leader	
Receipt For: Primary General	Aggregate Year-to-Date ▼	
Other (specify) ▼	240.00	
SUBTOTAL of Receipts This Page (optional)	<b>•</b>	423.34
TOTAL This Period (last page this line number of	only)	

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SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 17 OF 59 (check only one)    X   11a	
Any information copied from such Reports and Statements may or for commercial purposes, other than using the name and a			
NAME OF COMMITTEE (In Full)  National Association of Mutual Insurance	Companies PAC		

or for commercial purposes, other than using	the name and address of any political committee to	o solicit contributions from such committee.
NAME OF COMMITTEE (In Full)  National Association of Mutua	Il Insurance Companies PAC	
Full Name (Last, First, Middle Initial)  Mr. Kurt P. Foley  Mailing Address 1510 N Elms Rd		Date of Receipt
Mailing Address 1510 N Ellis Ru		03 03 2016
City	State Zip Code	Transaction ID : AAE7A8D7DAC26484090A
Flint	MI 48532-2033	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С	3500.00
Name of Employer	Occupation	Memo Item
Pioneer State Mutual Insurance Company	President & CEO	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General  Other (specify) ▼	3500.00	
Full Name (Last, First, Middle Initial)  B. Mr. Brad Fortner PFMM, FMDC		Date of Receipt
Mailing Address 703 W Poplar St		03 28 2016
City	State Zip Code	Transaction ID: A3F64C21253B74A29A1B
Rogers	AR 72756-4443	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	100.00
Name of Employer	Occupation	Memo Item
Farmers Protective Mutual Insurance Co	Chief Operations Officer/Secretary	
Receipt For:  Primary  General	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	500.00	
Full Name (Last, First, Middle Initial)  C. Mr. Brad Fowler		Date of Receipt
Mailing Address 214 McElwain Dr		03 07 2016
City	State Zip Code	Transaction ID : ADCB303DA6F5740EE8B
Cameron	MO 64429-1350	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С	250.00
Name of Employer	Occupation	Memo Item
Cameron Mutual Insurance Company	President & CEO	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General  Other (specify) ▼	250.00	
SUBTOTAL of Receipts This Page (optional)	<b>&gt;</b>	3850.00
TOTAL This Period (last page this line numb	er only)	

Use separate schedule(s) for each category of the Detailed Summary Page		_	LINE	PAGE		18	OF	59			
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not be sold or used by any person for the purpose of soliciting contributions dress of any political committee to solicit contributions from such committee.											
71											

	Detailed Summary Page	13 14 15 16 17					
	and Statements may not be sold or used by any pering the name and address of any political committee to	son for the purpose of soliciting contributions					
NAME OF COMMITTEE (In Full)	ual Insurance Companies PAC						
Full Name (Last, First, Middle Initial)  A. Mr. Chuck Garry		Date of Receipt					
Mailing Address 1510 N Elms Rd		03 03 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y					
City	State Zip Code	Transaction ID : AA8F15289C0624556881					
Flint	MI 48532-2033	_ Amount of Each Receipt this Period					
FEC ID number of contributing federal political committee.	C	300.00					
Name of Employer	Occupation	Memo Item					
Pioneer State Mutual Insurance Company	Vice President - Director of Claims						
Receipt For:	Aggregate Year-to-Date ▼	7					
Primary General							
Other (specify) ▼	300.00						
Full Name (Last, First, Middle Initial)  B. Mr. Bryan Gilleland		Date of Receipt					
Mailing Address 1 Mutual Ave	03 25 2016						
City	State Zip Code	Transaction ID : AFA7DD8321C1B4E3AB19					
Frankenmuth	MI 48787-1000	Amount of Each Receipt this Period					
FEC ID number of contributing federal political committee.	ů – – – – – – – – – – – – – – – – – – –						
Name of Employer	Occupation	Memo Item					
Frankenmuth Mutual Insurance Company	Senior Vice President						
Receipt For:	Aggregate Year-to-Date ▼	7					
Primary General							
Other (specify) ▼	230.82						
Full Name (Last, First, Middle Initial)  C. Mr. Gordon H. Gingrich		Date of Receipt					
Mailing Address 711 Surfwood Ln		03 03 2016					
City	State Zip Code	Transaction ID: A180FFD5D9A5F4FE7959					
Davison	MI 48423-1224	Amount of Each Receipt this Period					
FEC ID number of contributing federal political committee.	C	300.00					
Name of Employer	Occupation	- Memo Item					
Pioneer State Mutual Insurance Company							
Receipt For:	Aggregate Year-to-Date ▼	7					
Primary General							
Other (specify) ▼	300.00						
SUBTOTAL of Receipts This Page (option	al)	638.47					
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	FOR LINE NUMBER: PAGE 19 OF 59										
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	d Statements may not be sold or used by any pers the name and address of any political committee to	
NAME OF COMMITTEE (In Full)  National Association of Mutua	Il Insurance Companies PAC	
Full Name (Last, First, Middle Initial)  Mr. Harlan W. Gingrich  Mailing Address 7456 Wicklow North Dr		Date of Receipt
City Davison  FEC ID number of contributing federal political committee.  Name of Employer  Pioneer State Mutual Insurance Company  Receipt For:  Primary  General  Other (specify)	State Zip Code MI 48423-8380  C  Occupation Director  Aggregate Year-to-Date ▼  300.00	O3 O3 2016  Transaction ID : AD8794657E47A455C8C4  Amount of Each Receipt this Period  300.00  Memo Item
Full Name (Last, First, Middle Initial)  Chris Goeglein  Mailing Address PO Box 2227  City Fort Wayne  FEC ID number of contributing federal political committee.  Name of Employer Brotherhood Mutual Insurance Company  Receipt For:  Primary General Other (specify)	State Zip Code IN 46801-2227  C Occupation Director  Aggregate Year-to-Date ▼	Date of Receipt  03 03 2016  Transaction ID: AE112667A573A4217B2A  Amount of Each Receipt this Period  250.00  Memo Item
Full Name (Last, First, Middle Initial)  Ms. Yvette Gonzales  Mailing Address 3030 N 3rd St  City Phoenix  FEC ID number of contributing federal political committee.  Name of Employer  CopperPoint Mutual Insurance Company  Receipt For:  Primary General Other (specify)	State Zip Code AZ 85012-3074  C  Occupation Senior Vice President & CIO  Aggregate Year-to-Date ▼  208.35	Date of Receipt    M = M
SUBTOTAL of Receipts This Page (optional)	<b>•</b>	591.67
TOTAL This Period (last page this line numb	er only)	

Llas concrete cohodulo(s)	FOR LINE NUMBER: PAGE 20 OF 59										
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Detailed Summary Page	X   11a   11b   11c   12										
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NAME OF COMMITTEE (In Full)														
National Association of Mutual	Insurance (	Companies I	PAC											
Full Name (Last, First, Middle Initial) <b>A.</b> Ms. Yvette Gonzales					Date of	Red	ceipt							
Mailing Address 3030 N 3rd St					м = м	/	17	/ Y	2016	Y				
City	State	Zip Code		┦ "		actio		1E8B15		CFDB20				
Phoenix	AZ	85012-3074		Transaction ID : A1E8B157CF80F4CFDB20  Amount of Each Receipt this Period										
FEC ID number of contributing federal political committee.	С					_	,		41.6	7				
Name of Employer	Occupation				Men	no It	em							
Name of Employer	Occupation	tranidant 9 CIO			_									
CopperPoint Mutual Insurance Company Receipt For:		resident & CIO		$\dashv$										
Primary General	Aggregate Ye	ear-to-Date ▼												
Other (specify) ▼		7	250.02											
Full Name (Last, First, Middle Initial)  B. Mr. Jimi Grande					Date of	Red	ceipt							
Mailing Address 122 C St NW					M = M	/	D D	/ Y	Y	Y				
Ste 540				_	03		04		2016					
City	State	Zip Code							39C64F4	0BA982				
Washington	DC	20001-2102			mount	of E	Each Red	ceipt this	Period					
FEC ID number of contributing federal political committee.	С				7	_	,	,	113.6	4				
Name of Employer	Occupation				Men	no It	em							
National Association of Mutual Insuran	Senior Vice P	resident-Federal a	nd Poli											
Receipt For:	Aggregate Ye	ear-to-Date ▼												
Primary General  Other (specify) ▼		, ,	568.20											
Full Name (Last, First, Middle Initial)  C. Mr. Jimi Grande					Date of	Red	ceipt							
Mailing Address 122 C St NW Ste 540				1	M - M 03	/	23	/ Y	2016	Y				
City	State	Zip Code			Transa	actio	on ID : A	1F97AB	5823DE4	F0597A				
Washington	DC	20001-2102			mount	of E	Each Red	eipt this	Period					
FEC ID number of contributing federal political committee.	C						,	,	113.6	4				
Name of Employer	Occupation			- [	Men	no It	em							
National Association of Mutual Insuran	Senior Vice P	resident-Federal a	ınd Poli											
Receipt For:		ear-to-Date ▼												
Primary General	/ iggi cgale 16	oai to Dato ₹												
Other (specify) ▼	L		681.84											
SUBTOTAL of Receipts This Page (optional)			·····•				,		268.9	5				
TOTAL This Period (last page this line number	r only)		<b>&gt;</b>				,	,						

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SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 21 OF 59 (check only one)    X   11a							
Any information copied from such Reports and Statements ma or for commercial purposes, other than using the name and a									
NAME OF COMMITTEE (In Full)  National Association of Mutual Insurance Companies PAC									
Full Name (Last, First, Middle Initial)									

NAME OF COMMITTEE (In Full)  National Association of Mutu	al Insurance Companies PAC	
Full Name (Last, First, Middle Initial)  Mr. Jimi Grande  Mailing Address 122 C St NW  Ste 540  City  Washington  FEC ID number of contributing federal political committee.  Name of Employer  National Association of Mutual Insuran  Receipt For:  Primary  General  Other (specify)	State Zip Code DC 20001-2102  C  Occupation Senior Vice President-Federal and Poli  Aggregate Year-to-Date ▼  795.48	Date of Receipt  03 31 2016  Transaction ID: A352DE266F7AD448B8D6  Amount of Each Receipt this Period  113.64  Memo Item
Full Name (Last, First, Middle Initial)  Mr. Norman Greczyn  Mailing Address 550 Eisenhower Rd  City  Leavenworth  FEC ID number of contributing federal political committee.  Name of Employer  Armed Forces Insurance Exchange  Receipt For:  Primary  General  Other (specify) ▼	State Zip Code KS 66048-1190  C  Occupation Director  Aggregate Year-to-Date ▼  250.00	Date of Receipt  03 03 2016  Transaction ID : AED54CFACABAF4F4D840  Amount of Each Receipt this Period  250.00  Memo Item
Full Name (Last, First, Middle Initial)  Mr. Jonathan C. Grether MSIM  Mailing Address PO Box 370  City Algona  FEC ID number of contributing federal political committee.  Name of Employer  Pharmacists Mutual Insurance Company  Receipt For:  Primary  General  Other (specify)	State Zip Code IA 50511-0370  C  Occupation COO  Aggregate Year-to-Date  250.00	Date of Receipt    Mark
SUBTOTAL of Receipts This Page (optional	ı) <b>&gt;</b>	613.64
TOTAL This Period (last page this line num	nber only)	

FOR LINE NUMBER: PAGE 22 OF 59 Use separate schedule(s) (check only one) for each category of the X 11a 11b 12 11c Detailed Summary Page 14 13 15 16

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) National Association of Mutual Insurance Companies PAC Full Name (Last, First, Middle Initial) Mr. Ronald J. Habegger Date of Receipt Mailing Address 12284 Kiska Cir NE 01 2016 City Zip Code State Transaction ID: AB56FFD78016D41F0A04 MN Blaine 55449-6648 Amount of Each Receipt this Period FEC ID number of contributing C 250.00 federal political committee. Memo Item Name of Employer Occupation **Brotherhood Mutual Insurance Company** Director Receipt For: Aggregate Year-to-Date ▼ Primary General 250.00 Other (specify) Full Name (Last, First, Middle Initial) B. Mr. John Hair Date of Receipt Mailing Address 122 C St NW Ste 540 03 23 2016 City State Zip Code Transaction ID: A669C249870AE4F2E94E DC Washington 20001-2102 Amount of Each Receipt this Period FEC ID number of contributing 40.00 federal political committee. Memo Item Name of Employer Occupation National Association of Mutual Insuran Federal Affairs Director Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) 240,00 Full Name (Last, First, Middle Initial) C. Mr. John Hair Date of Receipt Mailing Address 122 C St NW 03 31 2016 Ste 540 City Zip Code State Transaction ID: AD3A64E79A89A46E3B56 DC Washington 20001-2102 Amount of Each Receipt this Period FEC ID number of contributing С 40.00 federal political committee. Memo Item Name of Employer Occupation Federal Affairs Director National Association of Mutual Insuran Receipt For: Aggregate Year-to-Date ▼ Primary General 280.00 Other (specify) 330.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only)..... 9 9

Llos conorato cohodulo(a)		FOR LINE NUMBER: PAGE 23 OF 59												
Use separate schedule(s) for each category of the Detailed Summary Page	(0	(check only one)  X 11a 11b 11c								12				
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Companies PAC														

	Statements may not be sold or used by any pers he name and address of any political committee to	
NAME OF COMMITTEE (In Full)  National Association of Mutua	I Insurance Companies PAC	
Full Name (Last, First, Middle Initial) Mr. F. Timothy Hegarty Jr., CPCU Mailing Address 222 Ames St  City	Date of Receipt  03 22 2016  Transaction ID : A3C49ED359FCB49BC8F4	
Dedham  FEC ID number of contributing federal political committee.  Name of Employer  Norfolk & Dedham Mutual Fire Insurance  Receipt For:  Primary General  Other (specify) ▼	MA 02026-1850  C  Occupation Chairman, President, & CEO  Aggregate Year-to-Date ▼  230.76	Amount of Each Receipt this Period  38.46  Memo Item
Full Name (Last, First, Middle Initial)  Mr. Stuart Henderson  Mailing Address 5350 W 78th St  City  Minneapolis  FEC ID number of contributing federal political committee.  Name of Employer Information Requested  Receipt For:  Primary General  Other (specify)	State Zip Code MN 55439-3101  C  Occupation Information Requested  Aggregate Year-to-Date ▼  2500.00	Date of Receipt  03 11 2016  Transaction ID : A3AE4AC76A6A64824995  Amount of Each Receipt this Period  2500.00  Memo Item
Full Name (Last, First, Middle Initial)  Mr. Michaele Hobson  Mailing Address 11983 Townline Rd  City Grand Blanc  FEC ID number of contributing federal political committee.  Name of Employer  Pioneer State Mutual Insurance Company  Receipt For:  Primary General Other (specify)	State Zip Code MI 48439-1628  C  Occupation Director  Aggregate Year-to-Date ▼  300.00	Date of Receipt  03 03 2016  Transaction ID: AD488C1BBAB0748F6AB2  Amount of Each Receipt this Period  300.00  Memo Item
SUBTOTAL of Receipts This Page (optional).	<u> </u>	2838.46
TOTAL This Period (last page this line number	er only)	7 7 7

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SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS			FOR LINE NUMBER: PAGE 24 OF 59 (check only one)											
"	EMIZED RECEIPTS		for each category of the Detailed Summary Page		<b>1</b> 1a		11b	$\vdash$	I1c	12		_		
	ny information copied from such Reports and							of soli			butior			
or	for commercial purposes, other than using the	ne name and a	address of any political committe	e to so	olicit co	ntrib	utions	from	such	comn	nittee			
	Name of committee (In Full)  National Association of Mutual	Insurance	e Companies PAC											
Α.	Full Name (Last, First, Middle Initial) Ms. Nancy Jacobson CPCU, CFE				Date o	f Re	eceipt							
	Mailing Address 5350 W 78th St				03	/	3		Y	2016				
	City	State	Zip Code		Trans	sact	ion ID	: A7E	3BBB:	2C24F	37A4	720AA		
	Minneapolis	MN	55439-3101	_	Amoun	t of	Each	Rece	ipt this	s Peri	od			
	FEC ID number of contributing federal political committee.	С					7		7	25	50.00			
	Name of Employer	Occupation	1		III IME	emo l	tem							
	Western National Mutual Insurance Comp	Director, Sp	pecial Investigations Unit	_										
	Receipt For:  Primary General  Other (specify) ▼	Aggregate	Year-to-Date ▼ 250.00	]										
В.	Full Name (Last, First, Middle Initial)  Mr. Rick Jones  Mailing Address 3030 N 3rd St						Date of Receipt							
	City Phoenix	State AZ	Zip Code 85012-3074		03 07 2016  Transaction ID : A9885A8D3411347F79F4  Amount of Each Receipt this Period									
	FEC ID number of contributing federal political committee.	С					7		1	_	11.67			
	Name of Employer CopperPoint Mutual Insurance Company	Occupation Executive V	/ice President, COO & Presid		Memo Item									
	Receipt For:  Primary General  Other (specify) ▼	Aggregate	Year-to-Date ▼ 208.35	]										
<u>с.</u>	Full Name (Last, First, Middle Initial) Mr. Rick Jones				Date o	f Re	eceipt							
	Mailing Address 3030 N 3rd St					/	1	D /	Y	2016				
	City	State	Zip Code		Trans	sact	ion ID	: A15	3C10	E74B	02430	COAE		
	Phoenix	AZ	85012-3074	$\dashv$	Amoun	t of	Each	Rece	ipt this	s Peri	od			
	FEC ID number of contributing federal political committee.	С			Ľ.	Ξ	,	_	,	4	11.67			
	Name of Employer	Occupation	1	$\dashv$	Me	emo l	ltem							
	CopperPoint Mutual Insurance Company	Executive \	/ice President, COO & Presid											
	Receipt For: Primary General	Aggregate	Year-to-Date ▼	,										

250.02

Other (specify)

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

333.34

	FOR LINE NUMBER: PAGE 25 OF 59							
Use separate schedule(s) for each category of the Detailed Summary Page	(check only one)    X   11a							
not be sold or used by any person for the purpose of soliciting contributions dress of any political committee to solicit contributions from such committee.								
Companies PAC								

		tatements may not be sold or used by any personame and address of any political committee to	
	NAME OF COMMITTEE (In Full)  National Association of Mutual I	nsurance Companies PAC	
A.	Full Name (Last, First, Middle Initial) Mr. Thomas Karol  Mailing Address 122 C St NW  Ste 540  City  Washington	State Zip Code DC 20001-2102	Date of Receipt  03 04 2016  Transaction ID: A16860C80D9CA43AD811
	FEC ID number of contributing federal political committee.  Name of Employer  National Association of Mutual Insuran  Receipt For:  Primary General  Other (specify)	Occupation Federal Affairs Counsel  Aggregate Year-to-Date ▼  227.30	Amount of Each Receipt this Period  45.46  Memo Item
B.	Full Name (Last, First, Middle Initial)  Mr. Thomas Karol  Mailing Address 122 C St NW Ste 540  City  Washington  FEC ID number of contributing federal political committee.  Name of Employer  National Association of Mutual Insuran  Receipt For:  Primary General Other (specify)	State Zip Code DC 20001-2102  C  Occupation Federal Affairs Counsel  Aggregate Year-to-Date ▼  272.76	Date of Receipt  M M M / D J J 2016  Transaction ID: AD27798515F1241768E6  Amount of Each Receipt this Period  45.46  Memo Item
C.	Full Name (Last, First, Middle Initial)  Mr. Thomas Karol  Mailing Address 122 C St NW Ste 540  City Washington  FEC ID number of contributing federal political committee.  Name of Employer  National Association of Mutual Insuran  Receipt For: Primary General Other (specify)	State Zip Code DC 20001-2102  C  Occupation Federal Affairs Counsel  Aggregate Year-to-Date ▼  318.22	Date of Receipt  03 31 2016  Transaction ID: AFD8B39FD5E8F46B28EF  Amount of Each Receipt this Period  45.46  Memo Item
		only)	136.38

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SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 26 OF 59 (check only one)    X   11a
Any information copied from such Reports and Statements may or for commercial purposes, other than using the name and an		
NAME OF COMMITTEE (In Full)  National Association of Mutual Insurance	Companies PAC	

or	for commercial purposes, other than using the	name and address of any political committee to	solicit contributions from such committee.
	NAME OF COMMITTEE (In Full) National Association of Mutual In	nsurance Companies PAC	
۹.	Full Name (Last, First, Middle Initial)  Ms. Jami Kelly  Mailing Address 1 Mutual Ave		Date of Receipt
			03 25 2016
	City	State Zip Code	Transaction ID: ADA522F67F1A14EE9B77
	Frankenmuth	MI 48787-1000	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	39.00
	Name of Employer	Occupation	Memo Item
	Frankenmuth Mutual Insurance Company	Vice President	
	Receipt For:	Aggregate Year-to-Date ▼	
	Primary General Other (specify) ▼	234.00	
3.	Full Name (Last, First, Middle Initial) Mr. Andrew Knudsen		Date of Receipt
	Mailing Address 1 Mutual Ave		03 25 2016
	City	State Zip Code	Transaction ID : A2E4682A67726432599B
	Frankenmuth	MI 48787-1000	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С	38.00
	Name of Employer	Occupation	Memo Item
	Frankenmuth Mutual Insurance Company	Vice President, Claims	
	Receipt For:	Aggregate Year-to-Date ▼	
	Primary General Other (specify) ▼	228.00	
	Full Name (Last, First, Middle Initial) Mr. Steven D. Linkous		Date of Receipt
	Mailing Address 200 N Main St		03 31 2016
	City	State Zip Code	Transaction ID : AB021892B37274251A5F
	Bel Air	MD 21014-3554	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	209.32
	Name of Employer	Occupation	Memo Item
	Harford Mutual Insurance Company	President & CEO	
	Receipt For:	Aggregate Year-to-Date ▼	
	Primary General  Other (specify) ▼	627.96	
s	UBTOTAL of Receipts This Page (optional)		286.32
	OTAL This Period (last page this line number of	<u>`</u>	

Use separate schedule(s)	FOR LINE NUMBER: PAGE 27 OF 59	_							
for each category of the Detailed Summary Page	(check only one)       X       11a       11b       11c       12       13       14       15       16       17								
not be sold or used by any person for the purpose of soliciting contributions dress of any political committee to solicit contributions from such committee.									
Companies PAC									

	nd Statements may not be sold or used by any pers the name and address of any political committee t	
NAME OF COMMITTEE (In Full)  National Association of Mutua	al Insurance Companies PAC	
Full Name (Last, First, Middle Initial)  Mr. Brian D. Lopata  Mailing Address 1 Preferred Way		Date of Receipt
City New Berlin  FEC ID number of contributing federal political committee.  Name of Employer  Preferred Mutual Insurance Company  Receipt For:  Primary General Other (specify)	State Zip Code NY 13411-1800  C  Occupation SVP, Profit Center Operations & Custom  Aggregate Year-to-Date ▼  280.00	Transaction ID: A7D9C5264FE03430EB26  Amount of Each Receipt this Period  80.00  Memo Item
Full Name (Last, First, Middle Initial)  Mr. Brian D. Lopata  Mailing Address 1 Preferred Way  City  New Berlin  FEC ID number of contributing federal political committee.  Name of Employer  Preferred Mutual Insurance Company  Receipt For:  Primary  General  Other (specify)	State Zip Code NY 13411-1800  C  Occupation SVP, Profit Center Operations & Custom  Aggregate Year-to-Date ▼  320.00	Date of Receipt    M
Full Name (Last, First, Middle Initial)  Mr. Jeffrey Lopata  Mailing Address 1 Preferred Way  City New Berlin  FEC ID number of contributing federal political committee.  Name of Employer Preferred Mutual Insurance Company  Receipt For:  Primary General Other (specify)	State Zip Code NY 13411-1800  C  Occupation Manager - Commercial Lines E-Business  Aggregate Year-to-Date ▼  269.29	Date of Receipt  03 07 2016  Transaction ID: A525A32E9200E467ABBC  Amount of Each Receipt this Period  76.94  Memo Item
SUBTOTAL of Receipts This Page (optional	)	196.94
TOTAL This Period (last page this line number	ber only)	

C.

SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS			Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 28 OF 59 (check only one)    X   11a
or for commercia		he name and a	ddress of any political committee	person for the purpose of soliciting contributions e to solicit contributions from such committee.
Mr. Jeffrey	ast, First, Middle Initial) Lopata ss 1 Preferred Way	State	Zip Code	Date of Receipt  03 31 2016  Transaction ID : AC6AC0C4FEE6F4A6B91
New Berlin		NY C	13411-1800	Amount of Each Receipt this Period  38.47  Memo Item
Preferred Mutu Receipt For:	ual Insurance Company	Manager - 0	Commercial Lines E-Business  Year-to-Date ▼  307.76	
B. Ms. Lisa L	ast, First, Middle Initial) Ott SS 1510 N Elms Rd			Date of Receipt  03 03 2016
City Flint FEC ID numb federal politica Name of Emp		State MI	Zip Code 48532-2033	Transaction ID: A68963EB45ACA4EF4A1: Amount of Each Receipt this Period  300.00  Memo Item
Diaman Ctata I	Mustual Income and Commence.			

Name of Employer	Occupation	Memo Item
Pioneer State Mutual Insurance Company	Vice President/Treasurer	
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00	
Full Name (Last, First, Middle Initial) Mr. Sammy Mah		Date of Receipt
Mailing Address 1222 1/2 Cooksie St		03 04 2016
City	State Zip Code	Transaction ID : A6A1C1777712C4AF1A56
Baltimore	MD 21230-5231	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	250.00
Name of Employer	Occupation	Memo Item
Brotherhood Mutual Insurance Company	Director	
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼  250.00	
UBTOTAL of Receipts This Page (optional)		588.47

TOTAL This Period (last page this line number only).....

### S 17

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS			Use separate schedule(s)	FOR LINE NUMBER: PAGE 29 OF (check only one)							OF	59
11	EINIZED RECEIPTS		for each category of the Detailed Summary Page		11a		11b		1c	12		_
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	ny information copied from such Reports and for commercial purposes, other than using the											
	Name of committee (in Full)  National Association of Mutual	Insurance	Companies PAC									
Α.	Full Name (Last, First, Middle Initial) Ms. Karen Mashinski				Date of	f Re	ceipt					
	Mailing Address 200 N Main St				м - м 03	/	31		Y	y y 2016	Y	
	City Bel Air	State MD	Zip Code 21014-3554									DAA58
		IVID	21014-3334	′	Amount	t of	Each	Recei	pt this	s Perio	od	
	FEC ID number of contributing federal political committee.	С			<u></u>	_	7		7	8	3.34	
	Name of Employer	Occupation			Mei	mo It	tem					
	Harford Mutual Insurance Company	CFO										
	Receipt For:  Primary General  Other (specify) ▼	Aggregate	Year-to-Date ▼ 250.02	]								
В.	Full Name (Last, First, Middle Initial) Mr. Phil McCain				Date of	f Re	ceipt					
	Mailing Address 1 Mutual Ave				M M M	/	25		Y	y y 2016	Y	
	City	State	Zip Code									4C99D
	Frankenmuth	MI	48787-1000		Amount	t of	Each	Recei	pt this	s Peric	od	
	FEC ID number of contributing federal political committee.	С			<u></u>	_	,		7	3	8.46	
	Name of Employer	Occupation			Me	mo l	tem					
	Frankenmuth Mutual Insurance Company	Vice Preside	ent, IT									
	Receipt For:  Primary General  Other (specify) ▼	Aggregate	Year-to-Date ▼ 230.76	]								
<del>С</del> .	Full Name (Last, First, Middle Initial) Mr. Brian S. McLeod				Date of	f Re	ceipt					
	Mailing Address 1 Mutual Ave				M = M	/	25		Υ	20 <u>1</u> 6	■ Y	1
	City Frankenmuth	State MI	Zip Code 48787-1000		Trans Amount							288865
	FEC ID number of contributing federal political committee.	С					,	Ξ	7	3	8.54	
	Name of Employer	Occupation		-	Me	mo l	tem					
	Frankenmuth Mutual Insurance Company		ent, Secretary & Treasurer									
	Receipt For:	Aggregate	Year-to-Date ▼									

231.24

Other (specify)

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

160.34

### SCHEDULE A (FEC Form 3X)

Use separate schedule(s) for each category of the Detailed Summary Page	F	FOR LINE NUMBER: PAGE 30 OF 59										
	(0	(check only one)										
		X	11a		11b		11c		12			
			13		14		15		16			17
not be sold or used by any person for the purpose of soliciting contributions dress of any political committee to solicit contributions from such committee.												

ITEMIZED RECEIPTS Any information copied from such Reports and Statements may or for commercial purposes, other than using the name and add NAME OF COMMITTEE (In Full) National Association of Mutual Insurance Companies PAC Full Name (Last, First, Middle Initial) Mr. David Middleton Date of Receipt Mailing Address PO Box 68700 2016 23 City State Zip Code Transaction ID: A777F4A12A0D0401B818 IN Indianapolis 46268-0700 Amount of Each Receipt this Period FEC ID number of contributing 40.00 federal political committee. Memo Item Name of Employer Occupation Vice President - Finance National Association of Mutual Insuran Receipt For: Aggregate Year-to-Date ▼ Primary General 240.00 Other (specify) Full Name (Last, First, Middle Initial) B. Mr. David Middleton Date of Receipt Mailing Address PO Box 68700 03 31 2016 City State Zip Code Transaction ID: A5DA632EE600641BEA80 Indianapolis IN 46268-0700 Amount of Each Receipt this Period FEC ID number of contributing 40.00 federal political committee. Memo Item Name of Employer Occupation National Association of Mutual Insuran Vice President - Finance Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) 280,00 Full Name (Last, First, Middle Initial) c. Ms. Dona L. Mohr Date of Receipt Mailing Address 1725 Hopley Ave 28 03 2016 City State Zip Code Transaction ID: A1481946B4B4945758EF OH **Bucyrus** 44820-3569 Amount of Each Receipt this Period FEC ID number of contributing C 45.00 federal political committee. Memo Item Name of Employer Occupation Assistant Vice President-Quality Servi Ohio Mutual Insurance Company Receipt For: Aggregate Year-to-Date ▼ Primary General 225.00 Other (specify) 125.00 SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

FOR LINE NUMBER: PAGE 31 OF 59 Use separate schedule(s) (check only one) for each category of the X 11a 11b 12 11c Detailed Summary Page 13 14 15 16

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) National Association of Mutual Insurance Companies PAC Full Name (Last, First, Middle Initial) Ms. Dona L. Mohr Date of Receipt Mailing Address 1725 Hopley Ave 2016 31 City Zip Code State Transaction ID: A203DD22B4D8146D8B36 OH Bucyrus 44820-3569 Amount of Each Receipt this Period FEC ID number of contributing C 45.00 federal political committee. Memo Item Name of Employer Occupation Ohio Mutual Insurance Company Assistant Vice President-Quality Servi Receipt For: Aggregate Year-to-Date ▼ Primary General 270.00 Other (specify) Full Name (Last, First, Middle Initial) B. Mr. Eric Nelson Date of Receipt Mailing Address 1460 Wells St 03 31 2016 City State Zip Code Transaction ID: A20FD194EA8C74213926 WA Enumclaw 98022-3003 Amount of Each Receipt this Period FEC ID number of contributing 250.00 federal political committee. Memo Item Name of Employer Occupation Mutual of Enumclaw Insurance Company President & CEO Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) 750,00 Full Name (Last, First, Middle Initial) c. Mr. Tony Paris Date of Receipt Mailing Address 1510 N Elms Rd 03 03 2016 City State Zip Code Transaction ID: AA9293EC1E2874C0AB7B MI Flint 48532-2033 Amount of Each Receipt this Period FEC ID number of contributing С 500.00 federal political committee. Memo Item Name of Employer Occupation Vice President, CIO Pioneer State Mutual Insurance Company Receipt For: Aggregate Year-to-Date ▼ Primary General 500.00 Other (specify) 795.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only)..... 9

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: PAGE 32 OF 59									
	(0	(check only one)									
		X	11a		11b		11c		12		
Dotailed Carrillary 1 age			13		14		15		16		17
not be sold or used by any person for the purpose of soliciting contributions dress of any political committee to solicit contributions from such committee.											

Any information copied from such Reports and Statements may or for commercial purposes, other than using the name and add NAME OF COMMITTEE (In Full) National Association of Mutual Insurance Companies PAC Full Name (Last, First, Middle Initial) Mr. John A. Paul PFMM, FMDC Date of Receipt Mailing Address PO Box 498 2016 23 City State Zip Code Transaction ID: ABACE248CF0434DD9B93 IΑ Council Bluffs 51502-0498 Amount of Each Receipt this Period FEC ID number of contributing 100.00 federal political committee. Memo Item Name of Employer Occupation Western Iowa Mutual Insurance Associat President Receipt For: Aggregate Year-to-Date ▼ Primary General 300.00 Other (specify) Full Name (Last, First, Middle Initial) B. Mr. Peter Pelizza Date of Receipt Mailing Address PO Box 5555 03 07 2016 City State Zip Code Transaction ID: A8CFAF951500643FAB2A Madison WI 53705-0555 Amount of Each Receipt this Period FEC ID number of contributing 500.00 federal political committee. Memo Item Name of Employer Occupation Rural Mutual Insurance Company CEO Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) 500,00 Full Name (Last, First, Middle Initial) c. Mr. Randall S. Peters Date of Receipt Mailing Address 9 N Branch Rd 03 14 2016 City State Zip Code Transaction ID: A8B34A78019664C49967 NY Cuba 14727-9200 Amount of Each Receipt this Period FEC ID number of contributing C 550.00 federal political committee. Memo Item Name of Employer Occupation President/CEO Allegany Co-Op Insurance Company Receipt For: Aggregate Year-to-Date ▼ Primary General 550.00 Other (specify) 1150.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

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SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 33 OF 59 (check only one)    X   11a
Any information copied from such Reports and Statements may or for commercial purposes, other than using the name and a		
NAME OF COMMITTEE (In Full)  National Association of Mutual Insurance	Companies PAC	
Full Name (Last, First, Middle Initial)  Mr. Mark Robison CPA, CPCU,  Mailing Address PO Box 2227		Date of Receipt

NAME OF COMMI National Ass	,	Insurance Companies PAC	
Full Name (Last, F Mr. Mark Robis Mailing Address P	son CPA, CPCU,		Date of Receipt
City	O DOX 2221	State Zip Code	03 07 2016
Fort Wayne		IN 46801-2227	Transaction ID : A6CD3F4CF6D444F32A6D  Amount of Each Receipt this Period
FEC ID number of federal political con	o o	C	300.00
Name of Employer	Il Insurance Company	Occupation Chairman and President	Memo Item
Receipt For: Primary Other (specif	General	Aggregate Year-to-Date ▼ 300.00	
Full Name (Last, F 3. Mr. Brian Sad			Date of Receipt
Mailing Address 34	448 160th St		03 24 2016
City Correctionville		State Zip Code IA 51016-8113	Transaction ID : A441D4DB79A5C44EF9F0  Amount of Each Receipt this Period
FEC ID number of federal political con	•	C	250.00
	surance Association o	Occupation Director	Memo Item
Receipt For: Primary Other (specif	General fy) <b>▼</b>	Aggregate Year-to-Date ▼ 250.00	
Full Name (Last, F . Mr. Athan M.			Date of Receipt
Mailing Address 1	460 Wells St		03 31 2016
City Enumclaw		State Zip Code WA 98022-3003	Transaction ID : AEEBFB57E7B9348BF944  Amount of Each Receipt this Period
FEC ID number of federal political cor	· ·	C	208.34
Name of Employer  Mutual of Enumcla	w Insurance Company	Occupation General Counsel	Memo Item
Receipt For: Primary Other (specif	General fy) ▼	Aggregate Year-to-Date ▼ 625.02	
SUBTOTAL of Rece	ipts This Page (optional)		758.34
TOTAL This Period	(last page this line number	only)	

	FOR	FOR LINE NUMBER: PAGE 34 OF									
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for each category of the Detailed Summary Page	X	11a		11b		11c		12			
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not be cold or used by any person for the purpose of coliciting contributions											

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) National Association of Mutual Insurance Companies PAC Full Name (Last, First, Middle Initial) Mr. Donald A. Smith Jr. Date of Receipt Mailing Address 3030 N 3rd St 07 2016 City Zip Code State Transaction ID: A06398F39D0DB4A4CA50 Phoenix ΑZ 85012-3074 Amount of Each Receipt this Period FEC ID number of contributing 125.00 federal political committee. Memo Item Name of Employer Occupation President & CEO CopperPoint Mutual Insurance Company Receipt For: Aggregate Year-to-Date ▼ Primary General 625.00 Other (specify) Full Name (Last, First, Middle Initial) B. Mr. Donald A. Smith Jr. Date of Receipt Mailing Address 3030 N 3rd St 03 17 2016 City State Zip Code Transaction ID: A5E792372187444C49CA ΑZ Phoenix 85012-3074 Amount of Each Receipt this Period FEC ID number of contributing 125.00 federal political committee. Memo Item Name of Employer Occupation CopperPoint Mutual Insurance Company President & CEO Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) 750,00 Full Name (Last, First, Middle Initial) c. Mr. John K. Smith CRM, CIC, Date of Receipt Mailing Address 2005 Market St 03 16 2016 Ste 1200 City State Zip Code Transaction ID: A1F41A77EB7404C3CB3E PΑ Philadelphia 19103-7008 Amount of Each Receipt this Period FEC ID number of contributing С 95.00 federal political committee. Memo Item Name of Employer Occupation President & CEO Pennsylvania Lumbermens Mutual Insuran Receipt For: Aggregate Year-to-Date ▼ Primary General 475.00 Other (specify)

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

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345.00

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:						PAGE	: 3	35 O	F	59
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			13		14		15		16		17
not be sold or used by any person for the purpose of soliciting contributions											

	Statements may not be sold or used by any persone name and address of any political committee to				
NAME OF COMMITTEE (In Full)					
National Association of Mutual	Insurance Companies PAC				
Full Name (Last, First, Middle Initial)  A. Mr. John K. Smith CRM, CIC,		Date of Receipt			
Mailing Address 2005 Market St Ste 1200		03 22 2016 -			
City	State Zip Code	Transaction ID : AE567E202DCF04E7A843			
Philadelphia	PA 19103-7008	Amount of Each Receipt this Period			
FEC ID number of contributing federal political committee.	C	95.00			
Name of Employer	Occupation	Memo Item			
Pennsylvania Lumbermens Mutual Insuran	President & CEO				
Receipt For:	Aggregate Year-to-Date ▼				
Primary General	riggiogato roal to Date y				
Other (specify) ▼	570.00				
Full Name (Last, First, Middle Initial)  B. Mr. John K. Smith CRM, CIC,		Date of Receipt			
Mailing Address 2005 Market St Ste 1200		03 31 2016			
City	State Zip Code	Transaction ID: A939D2E1D629148B7BDB			
Philadelphia	PA 19103-7008	Amount of Each Receipt this Period			
FEC ID number of contributing	C	95.00			
federal political committee.		95.00			
Name of Employer	Occupation	Memo Item			
Pennsylvania Lumbermens Mutual Insuran	President & CEO	_			
Receipt For:					
Primary General	Aggregate Year-to-Date ▼				
Other (specify) ▼	665.00				
Full Name (Last, First, Middle Initial)  C. Mr. Mark Splinter CPCU, ARe		Date of Receipt			
Mailing Address PO Box 269		03 14 2016 _			
City	State Zip Code	Transaction ID : ADD17E22FBD2A462EB8			
Wausau	WI 54402-0269	Amount of Each Receipt this Period			
FEC ID number of contributing federal political committee.	C	250.00			
Name of Employer	Occupation	Memo Item			
Mutual of Wausau Insurance Corporation	President & CEO				
Receipt For:					
Primary General	Aggregate Year-to-Date ▼				
Other (specify) ▼	250.00				
SUBTOTAL of Receipts This Page (optional)		440.00			
TOTAL This Period (last page this line numbe	r only)	7			

FOR LINE NUMBER: PAGE 36 OF 59 Use separate schedule(s) (check only one) for each category of the X 11a 11b 12 11c Detailed Summary Page 13 14 15 16

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) National Association of Mutual Insurance Companies PAC Full Name (Last, First, Middle Initial) Mr. David Stearns Date of Receipt Mailing Address 1510 N Elms Rd 2016 0.3 City Zip Code State Transaction ID: A55EA7465E8F74875926 Flint MI 48532-2033 Amount of Each Receipt this Period FEC ID number of contributing 250.00 federal political committee. Memo Item Name of Employer Occupation Pioneer State Mutual Insurance Company Field Property Supervisor Receipt For: Aggregate Year-to-Date ▼ Primary General 250.00 Other (specify) Full Name (Last, First, Middle Initial) B. Mr. Tim F. Sullivan RPLU Date of Receipt Mailing Address PO Box 68700 03 04 2016 City State Zip Code Transaction ID : A5E17C531430B4842BD0 IN Indianapolis 46268-0700 Amount of Each Receipt this Period FEC ID number of contributing 96.15 federal political committee. Memo Item Name of Employer Occupation NAMIC Insurance Company, Inc. President & CEO Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) 480.75 Full Name (Last, First, Middle Initial) c. Mr. Tim F. Sullivan RPLU Date of Receipt Mailing Address PO Box 68700 03 23 2016 City Zip Code State Transaction ID: AD4F56E3E4A7846CD8A8 IN Indianapolis 46268-0700 Amount of Each Receipt this Period FEC ID number of contributing С 96.15 federal political committee. Memo Item Name of Employer Occupation President & CEO NAMIC Insurance Company, Inc. Receipt For: Aggregate Year-to-Date ▼ Primary General 576.90 Other (specify) 442.30 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only)..... 9

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SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS			Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 37 OF 59 (check only one)    X   11a			
NAME OF Nation	ercial purposes, other than using the COMMITTEE (In Full) all Association of Mutual	ne name and a	ddress of any political committee	person for the purpose of soliciting contributions are to solicit contributions from such committee.			
Full Name (Last, First, Middle Initial)  Mr. Tim F. Sullivan RPLU  Mailing Address PO Box 68700  City State Indianapolis IN  FEC ID number of contributing federal political committee.			Zip Code 46268-0700	Date of Receipt  03 31 2016  Transaction ID: A561FCA7E802D4C88A4  Amount of Each Receipt this Period  96.15			
Receipt F	surance Company, Inc.	Occupation President & Aggregate		Memo Item			
B. Mr. Tel Mailing Ar  City Indianapo FEC ID n federal po Name of National A  Receipt F	olis  Jumber of contributing political committee.  Employer Association of Mutual Insuran For:  Inary General er (specify)	1	Zip Code 46268-0700  ent - Membership/Insurance Year-to-Date ▼ 240.00	Date of Receipt  03 23 2016  Transaction ID: A9F1050BACEBC4276945  Amount of Each Receipt this Period  40.00  Memo Item			
C. Mr. Te Mailing Ar  City Indianape FEC ID n federal po	umber of contributing blitical committee. Employer Association of Mutual Insuran	T	Zip Code 46268-0700  ent - Membership/Insurance Year-to-Date ▼	Date of Receipt  03 31 2016  Transaction ID : AD01BDA0B40144661AF3  Amount of Each Receipt this Period  40.00  Memo Item			

280.00

Primary

Other (specify) ▼

General

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

176.15

## SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

		FOR LINE NUMBER:					PAGE	: 3	88 OF		59
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for each category of the Detailed Summary Page		X	11a		11b		11c		12		
Detailed Cultillary 1 age			13		14		15		16		17
not be sold or used by any person for the purpose of soliciting contributions											

Any information copied from such Reports and Statements may or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) National Association of Mutual Insurance Companies PAC Full Name (Last, First, Middle Initial) Ms. Susan K. Taggart Date of Receipt Mailing Address PO Box 68 2016 City State Zip Code Transaction ID: AF0E29316146B41F4BE7 IN Remington 47977-0068 Amount of Each Receipt this Period FEC ID number of contributing C 500.00 federal political committee. Memo Item Name of Employer Occupation CEO Remington Farmers Mutual Insurance Com Receipt For: Aggregate Year-to-Date ▼ Primary General 500.00 Other (specify) Full Name (Last, First, Middle Initial) B. Mr. Joe Thesing Date of Receipt Mailing Address PO Box 68700 03 23 2016 City State Zip Code Transaction ID: A623EF770C91E4958A84 Indianapolis IN 46268-0700 Amount of Each Receipt this Period FEC ID number of contributing 40.00 federal political committee. Memo Item Name of Employer Occupation National Association of Mutual Insuran Vice President - State Affairs Receipt For: Aggregate Year-to-Date ▼ Primary General 240.00 Other (specify) Full Name (Last, First, Middle Initial) c. Mr. Joe Thesing Date of Receipt Mailing Address PO Box 68700 03 31 2016 City State Zip Code Transaction ID: AE88E887F99304066904 IN Indianapolis 46268-0700 Amount of Each Receipt this Period FEC ID number of contributing C 40.00 federal political committee. Memo Item Name of Employer Occupation Vice President - State Affairs National Association of Mutual Insuran Receipt For: Aggregate Year-to-Date ▼ Primary General 280.00 Other (specify) 580.00 SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

## SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

	FOR LINE NUMBER:	PAGE 39 OF 59							
Use separate schedule(s)	(check only one)								
for each category of the Detailed Summary Page	X 11a 11b	11c 12							
	13 14	15 16 17							
not be sold or used by any person for the purpose of soliciting contributions dress of any political committee to solicit contributions from such committee.									

Any information copied from such Reports and Statements may or for commercial purposes, other than using the name and add NAME OF COMMITTEE (In Full) National Association of Mutual Insurance Companies PAC Full Name (Last, First, Middle Initial) Mr. Bruce D. Thomas PFMM Date of Receipt Mailing Address PO Box 594 21 2016 City State Zip Code Transaction ID: AE6B90026B66748F6962 IΑ Algona 50511-0594 Amount of Each Receipt this Period FEC ID number of contributing C 100.00 federal political committee. Memo Item Name of Employer Occupation Heartland Mutual Insurance Association President Receipt For: Aggregate Year-to-Date ▼ Primary General 300.00 Other (specify) Full Name (Last, First, Middle Initial) B. Mr. Gary W. Thompson CPCU, CIC Date of Receipt Mailing Address PO Box 618 03 22 2016 City State Zip Code Transaction ID: AE38C6A7B900B4E5395B Columbia MO 65205-0618 Amount of Each Receipt this Period FEC ID number of contributing 200.00 federal political committee. Memo Item Name of Employer Occupation Columbia Mutual Insurance Company President/CEO Receipt For: Aggregate Year-to-Date ▼ Primary General

Full Name (Last, First, Middle Initial)  Mr. Randall Trinklein  Mailing Address 1 Mutual Ave	Date of Receipt  M = M / D = D / Y = Y = Y = Y = Y = Y = Y = Y = Y = Y
City State Zip Code	Transaction ID : A487703B392F5424DB48
Frankenmuth MI 48787-1000	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	39.00
Name of Employer Occupation	Memo Item
Frankenmuth Mutual Insurance Company Vice President of Administration	
Receipt For:  Primary  General  Other (specify) ▼  Aggregate Year-to-Date ▼  234.00	

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

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339.00

## SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page			LINE			PAGE		10 C	F	59	
	(0	(check only one)									
		X	11a		11b		11c		12		
			13		14		15		16		17
not be sold or used by any person for the purpose of soliciting contributions dress of any political committee to solicit contributions from such committee.											

Any information copied from such Reports and Statements may or for commercial purposes, other than using the name and add NAME OF COMMITTEE (In Full) National Association of Mutual Insurance Companies PAC Full Name (Last, First, Middle Initial) Mr. Aaron J. Valentine Date of Receipt Mailing Address 1 Preferred Way 07 2016 City State Zip Code Transaction ID: A9FE72A7FA2F14CD38EE NY New Berlin 13411-1800 Amount of Each Receipt this Period FEC ID number of contributing 100.00 federal political committee. Memo Item Name of Employer Occupation Senior Vice President, Treasurer & CFO Preferred Mutual Insurance Company Receipt For: Aggregate Year-to-Date ▼ Primary General 350.00 Other (specify) Full Name (Last, First, Middle Initial) B. Mr. Aaron J. Valentine Date of Receipt Mailing Address 1 Preferred Way 03 31 2016 City State Zip Code Transaction ID: AF8E2041F63B045BF8AF New Berlin NY 13411-1800 Amount of Each Receipt this Period FEC ID number of contributing 50.00 federal political committee. Memo Item Name of Employer Occupation Preferred Mutual Insurance Company Senior Vice President, Treasurer & CFO Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) 400,00 Full Name (Last, First, Middle Initial) c. Mr. Daniel West Date of Receipt Mailing Address 1510 N Elms Rd 03 03 2016 City State Zip Code Transaction ID: AC74801E4CCD5492B9BA MI Flint 48532-2033 Amount of Each Receipt this Period FEC ID number of contributing С 300.00 federal political committee. Memo Item Name of Employer Occupation Pioneer State Mutual Insurance Company Director Receipt For: Aggregate Year-to-Date ▼ Primary General 300.00 Other (specify) 450.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

								11 OF		59
Use separate schedule(s) for each category of the Detailed Summary Page	(ch	(check only one)								
	>	<b>1</b> 1a		11b		11c		12		
		13		14		15		16		17
not be sold or used by any person for the purpose of soliciting contributions										

	d Statements may not be sold or used by any pers the name and address of any political committee t	
NAME OF COMMITTEE (In Full)	al Insurance Companies PAC	
Full Name (Last, First, Middle Initial) Mr. William Woodbury		Date of Receipt
Mailing Address 6101 Anacapri Blvd		03 10 2016
City Lansing	State         Zip Code           MI         48917-3968	Transaction ID : AA5423054AA4C44FEA44 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	2500.00
Name of Employer  Auto-Owners Insurance Company  Receipt For:	Occupation SVP, Secretary & General Counsel  Aggregate Year-to-Date ▼	Memo Item
Primary General Other (specify) ▼	2775.01	
Full Name (Last, First, Middle Initial)  Mr. Jeffrey S. Wrobel Sr.		Date of Receipt
Mailing Address PO Box 6927		03 03 2016
City Richmond	State         Zip Code           VA         23230-0927	Transaction ID : A96407BDC6AAB41979A4 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	84.00
Name of Employer Mutual Assurance Society of Virginia	Occupation President	Memo Item
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼  218.00	
Full Name (Last, First, Middle Initial)  C. Mr. Robert M. Zak	1	Date of Receipt
Mailing Address 250 Main St		03 16 _ 2016 _
City Buffalo	State Zip Code NY 14202-4104	Transaction ID : A903201CE21C94E429B8  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	2750.00
Name of Employer	Occupation	Memo Item
Merchants Mutual Insurance Company Receipt For:	President & CEO  Aggregate Year-to-Date ▼	_
Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 2750.00	
SUBTOTAL of Receipts This Page (optional)	)	5334.00
TOTAL This Period (last page this line number)	per only)	27118.35

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SCHEDULE A (FEC Form 3	Use separate schedule(s)	FOR LINE NUMBER: PAGE 42 OF 59 (check only one)				
TEMIZED RECEIPTS	for each category of the Detailed Summary Page	11a 11b X 11c 12 13 14 15 16 17				
or for commercial purposes, other than using	and Statements may not be sold or used by any p ng the name and address of any political committee					
Name of COMMITTEE (In Full)  National Association of Mut	ual Insurance Companies PAC					
Full Name (Last, First, Middle Initial)  Nationwide Mutual Insurance Co  Mailing Address One Nationwide Plaza	mpany Political Action Committee	Date of Receipt				
1-32-301		03 28 2016				
City	State Zip Code	Transaction ID : A6D7340344CFA4540845				
Columbus	OH 43215	Amount of Each Receipt this Period				
FEC ID number of contributing federal political committee.	C C00076174	2500.00				
Name of Employer	Occupation	Memo Item				
Receipt For:	Aggregate Year-to-Date ▼					
Primary General  Other (specify) ▼	2500.00					
Full Name (Last, First, Middle Initial)		Date of Receipt				
Mailing Address		M = M / D = D / Y = Y = Y				
City	State Zip Code	Assessment of Footh Processing their Province				
FEC ID number of contributing	С	Amount of Each Receipt this Period				
federal political committee.						
Name of Employer	Occupation	Memo Item				
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼					
Full Name (Last, First, Middle Initial)		Data of Descipt				
Mailing Address		Date of Receipt				
City	State Zip Code	Amount of Each Receipt this Period				
FEC ID number of contributing federal political committee.	С					
Name of Employer	Occupation	Memo Item				
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼					
SUBTOTAL of Receipts This Page (option	al)	2500.00				
TOTAL This Period (last page this line pu		2500.00				

TOTAL This Period (last page this line number only).....

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SCHEDULE A (FEC Form 3 ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the	FOR LINE NUMBER: PAGE 43 OF 59 (check only one)					
I LIVILLED INCOLUT 13	Detailed Summary Page	11a 11b 11c 12 13 14 X 15 16 17					
Any information copied from such Reports or for commercial purposes, other than usi	and Statements may not be sold or used by any peng the name and address of any political committee	erson for the purpose of soliciting contributions to solicit contributions from such committee.					
NAME OF COMMITTEE (In Full)  National Association of Mut	ual Insurance Companies PAC						
Full Name (Last, First, Middle Initial)  NAMIC Administrative Fund		Date of Receipt					
Mailing Address 3601 Vincennes Rd  City	State Zip Code	03 25 2016 Transportion ID : A A 626284 A C F C D A A P A P					
Indianapolis	IN 46268-1154	Transaction ID : AA6363819C5CD44B4BA  Amount of Each Receipt this Period					
FEC ID number of contributing federal political committee.	C	79.27					
Name of Employer	Occupation	Memo Item  Reimb. of Bank Fees					
Receipt For:	Aggregate Year-to-Date ▼						
Primary General Other (specify) ▼	261.06						
Full Name (Last, First, Middle Initial)		Date of Receipt					
Mailing Address		M = M / D = D / Y = Y = Y					
City	State Zip Code	Amount of Each Receipt this Period					
FEC ID number of contributing federal political committee.	C	Amount of Lacif Necept this Period					
Name of Employer	Occupation	Memo Item					
Receipt For:	Aggregate Year-to-Date ▼						
Primary General Other (specify) ▼							
Full Name (Last, First, Middle Initial)	<u> </u>	Date of Receipt					
Mailing Address		M = M / D = D / Y = Y = Y					
City	State Zip Code	Amount of Each Receipt this Period					
FEC ID number of contributing federal political committee.	C						
Name of Employer	Occupation	Memo Item					
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼						
SUBTOTAL of Receipts This Page (option	nal)	79.27					
TOTAL This Period (last page this line nu	imber only)	79.27					

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 44 OF 59 (check only one)  11a 11b 11c 12 15 16 X 17
Any information copied from such Reports and or for commercial purposes, other than using the NAME OF COMMITTEE (In Full)  National Association of Mutual	ne name and a	ddress of any political committee	erson for the purpose of soliciting contributions
Full Name (Last, First, Middle Initial) Chase Bank  Mailing Address 8751 Michigan Rd  City Indianapolis  FEC ID number of contributing federal political committee.  Name of Employer  Receipt For: Primary Other (specify)		Zip Code 46268-3141 Year-to-Date ▼	Date of Receipt  03 31 2016  Transaction ID: AB94CF9E08FB34781A0E  Amount of Each Receipt this Period  3.90  Memo Item Interest
Full Name (Last, First, Middle Initial)  Chase Bank  Mailing Address 8751 Michigan Rd  City Indianapolis  FEC ID number of contributing federal political committee.  Name of Employer  Receipt For:  Primary General Other (specify)		Zip Code 46268-3141 Year-to-Date ▼	Date of Receipt  03 31 2016  Transaction ID: A6609D522F02648DCA9B  Amount of Each Receipt this Period  0.41  Memo Item Interest
Full Name (Last, First, Middle Initial)  Mailing Address  City  FEC ID number of contributing federal political committee.  Name of Employer  Receipt For:  Primary General Other (specify)   Other (specify)		Zip Code  Year-to-Date ▼	Amount of Each Receipt this Period  Memo Item
SUBTOTAL of Receipts This Page (optional)  TOTAL This Period (last page this line numbe		·	4 21

SCHEDULE B (FEC Form 3X)	Use separate schedule(s)	FOR LINE (check only	
ITEMIZED DISBURSEMENTS	for each category of the Detailed Summary Page	X 21b   27	22 23 24 25 26 28a 28b 28c 29 30b
Any information copied from such Reports and Staten or for commercial purposes, other than using the name			
NAME OF COMMITTEE (In Full)  National Association of Mutual Insu	•		SS.S. COMMISSION FOR SUCH COMMINGO.
Full Name (Last, First, Middle Initial)			
A. American Express			Date of Disbursement
Mailing Address PO Box 981540			03 28 2016
City S El Paso Purpose of Disbursement	State         Zip Code           TX         79998-1540		Transaction ID : B1B25E0DFEB6D43D188E
Credit Card Processing Fee			Amount of Each Disbursement this Period
Candidate Name		Category/ Type	97.51
	nent For: Primary General Other (specify) ▼		Memo Item
State: District:			
Full Name (Last, First, Middle Initial)  B. Aristotle International, Inc.			Date of Disbursement
Mailing Address 205 Pennsylvania Ave SE			03 11 2016
Washington	State         Zip Code           DC         20003-1164		Transaction ID : B229D012D95AE4EE1A01
Purpose of Disbursement Credit Card Processing Fee			Amount of Each Disbursement this Period
Candidate Name		Category/ Type	137.50
	nent For: Primary General Other (specify)		Memo Item
Full Name (Last, First, Middle Initial)  C. Chase Bank			Date of Disbursement
Mailing Address 8751 Michigan Rd			03 02 7 2016
Indianapolis	State Zip Code IN 46268-3141		Transaction ID : BB1C8D964562948488FD
Purpose of Disbursement Credit Card Processing Fee Candidate Name			Amount of Each Disbursement this Period
		Category/ Type	107.85
	nent For: Primary General Other (specify)		Memo Item
SUBTOTAL of Disbursements This Page (optional)			342.86
TOTAL This Period (last page this line number only)			342.86

SCHEDULE B (FEC Form 3X)	Han name with the Co.	FOR LINE	NUMBER: PAGE 46 OF 59
TEMIZED DISBURSEMENTS	Use separate schedule(s) for each category of the	(check only	
	Detailed Summary Page	21b 27	22 X 23 24 25 26 28a 28b 28c 29 30b
Any information copied from such Reports and Staten	nents may not be sold or use		
or for commercial purposes, other than using the nam			
NAME OF COMMITTEE (In Full)			
National Association of Mutual Insu	ırance Companies P	AC	
Full Name (Last, First, Middle Initial)			Data of Dishuranment
Andy Barr for Congress, Inc.			Date of Disbursement
Mailing Address P.O. Box 2059			03 17 2016
	State Zip Code		Transaction ID : BF34E8F8D94F243D3971
Lexington	KY 40588-2059		Transaction 15 . 51 34201 05341 2435337 1
Purpose of Disbursement Contribution to Committee			Amount of Each Disbursement this Period
Candidate Name		Category/	2522.22
Rep. Andy Barr IV		Type	2500.00
	nent For: 2016		Memo Item
Senate   X	Other (specify) — General		
State: KY District: 06	Other (specify) ▼		
Full Name (Last, First, Middle Initial)			
Building Leadership and Inspiring N	New Enterprise PAC		Date of Disbursement
Mailing Address P.O. Box 96			03 17 2016
•	State Zip Code		Transaction ID : B9874547EFECF430998D
Saint Elizabeth Purpose of Disbursement	MO 65075-0096		
Contribution to Committee			Amount of Each Disbursement this Period
Candidate Name		Category	S. Zasii Sissaissiinii tiili i siidd
		Category/ Type	5000.00
	nent For: 2016		Memo Item
	Primary General		
State: District:	Other (specify) ▼ Other2016		
Full Name (Last, First, Middle Initial)			
Carlos Curbelo Congress			Date of Disbursement
			M M / D D / Y Y Y Y
Mailing Address 8770 SW 72nd Street			03 09 2016
City	State Zip Code		Transaction ID : B65EF42C73DAA4327833
Miami	FL 33173-3512		1141134041011 ID . DUJE1 420/3DAA432/033
Purpose of Disbursement Contribution to Committee			Amount of Each Disbursement this Period
Candidate Name		Category/	
Rep. Carlos L. Curbelo		Type	2000.00
	nent For: 2016		Memo Item
	Primary		_
State: FL District: 26	Other (specify)		
20 20			
SUBTOTAL of Disbursements This Page (optional)			9500.00
TOTAL This Period (last page this line number only)			

TEMIZED DISBURSEMENTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NU (check only of 21b 27	
Any information copied from such Reports and Statem or for commercial purposes, other than using the name NAME OF COMMITTEE (In Full)  National Association of Mutual Insu	e and address of any political	by any person committee to so	for the purpose of soliciting contributions
Full Name (Last, First, Middle Initial)  A. Cathy McMorris Rodgers for Congre	ess		Date of Disbursement  O3 / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Spokane Purpose of Disbursement Contribution to Committee  Candidate Name  Rep. Cathy A. McMorris Rodgers  Office Sought:  House Senate  Disbursem	ent For: 2016 Primary General Other (specify)	Category/ Type	Transaction ID : BE5BAA078AAF34A22875  Amount of Each Disbursement this Period  2500.00  Memo Item
Full Name (Last, First, Middle Initial)  3. Citizens for Prosperity in America T  Mailing Address 228 S Washington St Ste 115  City S Alexandria Purpose of Disbursement Contribution to Committee  Candidate Name  Office Sought: House Senate President State: District:	tate Zip Code VA 22314-5404	Category/ Type	Date of Disbursement  03 17 2016  Transaction ID: B923916DF026E4055BE5  Amount of Each Disbursement this Period  1000.00  Memo Item
Washington Purpose of Disbursement Contribution to Committee  Candidate Name  Office Sought: House Disbursem Senate	tate Zip Code DC 20003-2620	Category/ Type	Date of Disbursement  03 09 2016  Transaction ID: BFC0F24121C064A5CAFE  Amount of Each Disbursement this Period  5000.00  Memo Item
SUBTOTAL of Disbursements This Page (optional)  TOTAL This Period (last page this line number only).			8500.00

E NUMBER: PAGE 48 OF 59
22 X 23 24 25 26 28a 28b 28c 29 30
rson for the purpose of soliciting contributions to solicit contributions from such committee.
to solicit contributions from such committee.
Date of Disbursement
03 29 2016
Transaction ID - BE2AFC942906A4F0404
Transaction ID : B52AFC843896A4E9191
Amount of Each Disbursement this Period
2000.00
Memo Item
Date of Disbursement
03 17 2016
Transaction ID : BE2E0FB7788A04FB4A
Amount of Each Disbursement this Period
2500.00
Memo Item
Date of Disbursement
03 17 2016
Transaction ID : BE9E056FEA4D54774B
Amount of Each Disbursement this Period
2500.00
Memo Item
7000.00

TEMIZED DISBURSEMENTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE N (check only 21b 27	
Any information copied from such Reports and Statem or for commercial purposes, other than using the name NAME OF COMMITTEE (In Full)  National Association of Mutual Insu	e and address of any political	by any perso committee to	n for the purpose of soliciting contributions
Full Name (Last, First, Middle Initial)  A. Elise for Congress  Mailing Address P.O. Box 500			Date of Disbursement  M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Glens Falls Purpose of Disbursement Contribution to Committee  Candidate Name Elise M Stefanik  Office Sought:  House Senate President	tate Zip Code NY 12801-0500  Then For: 2016 Primary General Other (specify)	Category/ Type	Transaction ID: B64A360A253ED412DA68  Amount of Each Disbursement this Period  2000.00  Memo Item
Melbourne Purpose of Disbursement Contribution to Committee  Candidate Name Rep. Bill Posey  Office Sought:  House Senate  Disbursem	tate Zip Code FL 32941-1486  lent For: 2016 Primary General Other (specify)	Category/ Type	Date of Disbursement  M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Cleveland Purpose of Disbursement Contribution to Committee  Candidate Name  Rep. Dave P. Joyce  Office Sought:  House Senate  Disbursem	tate Zip Code  OH 44143-3710  Ident For: 2016  Primary General  Other (specify)	Category/ Type	Date of Disbursement  M M M / D D / 2016  Transaction ID: B8CB96B0860FB4E4FB00  Amount of Each Disbursement this Period  2000.00  Memo Item
SUBTOTAL of Disbursements This Page (optional)  TOTAL This Period (last page this line number only).			5000.00

TEMIZED DISBURSEMENTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE N (check only 21b 27	
Any information copied from such Reports and Statem or for commercial purposes, other than using the nam NAME OF COMMITTEE (In Full)  National Association of Mutual Insu	e and address of any political	by any perso committee to	on for the purpose of soliciting contributions
Full Name (Last, First, Middle Initial)  A. Friends of Erik Paulsen  Mailing Address P.O. Box 44369  250 Prairie Center Drive			Date of Disbursement  M M / D D / Y Y Y Y Y  03 17 2016
Eden Prairie Purpose of Disbursement Contribution to Committee  Candidate Name  Rep. Erik Paulsen  Office Sought:    House   Disbursement   Senate   Disbursement   Disburs	tate Zip Code MN 55344-1369  ent For: 2016  Primary General Other (specify)	Category/ Type	Transaction ID : B9D30774BC7CF4C92AE8  Amount of Each Disbursement this Period  1000.00  Memo Item
Las Vegas Purpose of Disbursement Contribution to Committee  Candidate Name Rep. Joe J. Heck Jr.  Office Sought:  House Senate President State: NV District: 03	tate Zip Code NV 89136-3908  ent For: 2016 Primary General Other (specify)	Category/ Type	Date of Disbursement  M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Manchester Purpose of Disbursement Contribution to Committee  Candidate Name Sen. Kelly A. Ayotte  Office Sought: House Senate	ent For: 2016 Primary  Cher (specify)	Category/ Type	Date of Disbursement  M M M / D D / 2016  Transaction ID: B543719302ADC478DBF0  Amount of Each Disbursement this Period  1000.00  Memo Item
SUBTOTAL of Disbursements This Page (optional)  TOTAL This Period (last page this line number only).			4500.00

SCHEDULE B (FEC Form 3X)	Has somewhat and the Co.	FOR LINE	NUMBER: PAGE 51 OF 59
TEMIZED DISBURSEMENTS	Use separate schedule(s) for each category of the	(check only	
	Detailed Summary Page	21b	22 X 23 24 25 26 28a 28b 28c 29 30b
Any information copied from such Reports and Statem	nents may not be sold or use		
or for commercial purposes, other than using the nam			
NAME OF COMMITTEE (In Full)			
National Association of Mutual Insu	ırance Companies F	PAC	
Full Name (Last, First, Middle Initial)			Data of Dishumannant
A. Friends of Mia Love			Date of Disbursement
Mailing Address P.O. Box 255			03 17 2016
,	State Zip Code		Transaction ID : BCFE7429E88E04BC9AE3
	UT 84065-0255		11 a113 aCtion 10 . BOFE / 423 E00 EU4 BOSAES
Purpose of Disbursement Contribution to Committee			Amount of Each Disbursement this Period
Candidate Name		Category/	
Mia Love		Type	2500.00
	nent For: 2016		Memo Item
	Primary General		_
State: UT District: 04	Other (specify) ▼		
Full Name (Last, First, Middle Initial)			
Friends of Pat Toomey			Date of Disbursement
Mailing Address 228 S. Washington Street Suite 115			03 17 2016
,	State Zip Code VA 22314-5404		Transaction ID: B95A71EE15BE64BE0A76
Alexandria Purpose of Disbursement	22314-3404		
Contribution to Committee			Amount of Each Disbursement this Period
Candidate Name		Category/	1500.00
Sen. Pat J. Toomey	aont Forus 22.12	Type	
X Senate	nent For: 2016  Primary General  Other (specify)		Memo Item
State: PA District:			
Full Name (Last, First, Middle Initial)			
C. Hudson for Congress			Date of Disbursement
Mailing Address P.O. Box 5053			03 / 29 / 2016
City	State Zip Code		Transaction ID - BACCD4EC07E204754B00
	NC 28027-1500		Transaction ID : BAC6D1EC07E394754B00
Purpose of Disbursement Contribution to Committee			Amount of Each Disbursement this Period
Candidate Name		Category/	2500.00
Rep. Richard L. Hudson Jr.  Office Sought:  House Disburser	nent For: 2016	Туре	
	Primary General		Memo Item
	Other (specify) ▼		
State: NC District: 08			
			2522.22
SUBTOTAL of Disbursements This Page (optional)		·····•	6500.00
TOTAL This Period (last nage this line number only)			

TEMIZED DISBURSEMENTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE N (check only 21b 27	
Any information copied from such Reports and Statem or for commercial purposes, other than using the name NAME OF COMMITTEE (In Full)  National Association of Mutual Insu	e and address of any political	by any perso committee to	n for the purpose of soliciting contributions
Full Name (Last, First, Middle Initial)  A. Huizenga for Congress  Mailing Address P.O. Box 254			Date of Disbursement  O3 17 2016
Zeeland Purpose of Disbursement Contribution to Committee  Candidate Name  Rep. Bill P. Huizenga  Office Sought:  House Senate  Disbursem	ent For: 2016 Primary General Other (specify)	Category/ Type	Transaction ID: BA4628E5413584FBF833  Amount of Each Disbursement this Period  1500.00  Memo Item
Zeeland Purpose of Disbursement Contribution to Committee  Candidate Name Rep. Bill P. Huizenga  Office Sought:  House Senate  Disbursem	tate Zip Code MI 49464-0254  ent For: 2016 Primary General Other (specify)	Category/ Type	Date of Disbursement  M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Wadsworth Purpose of Disbursement Contribution to Committee  Candidate Name Rep. Jim B. Renacci  Office Sought:  House Senate  Disbursem	tate Zip Code DH 44281  ent For: 2016 Primary General Other (specify)	Category/ Type	Date of Disbursement  M M M / D D / 2016  Transaction ID: B5311BC266E944168A7E  Amount of Each Disbursement this Period  1000.00  Memo Item
SUBTOTAL of Disbursements This Page (optional)  TOTAL This Period (last page this line number only).			6000.00

TEMIZED DISBURSEMENTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE N (check only 21b 27	
Any information copied from such Reports and Statem or for commercial purposes, other than using the name NAME OF COMMITTEE (In Full)  National Association of Mutual Insu	e and address of any political	committee to	
Full Name (Last, First, Middle Initial)  A. Kevin McCarthy for Congress  Mailing Address P.O. Box 12667			Date of Disbursement  M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Bakersfield Purpose of Disbursement Contribution to Committee  Candidate Name  Rep. Kevin McCarthy  Office Sought:  House Senate	ent For: 2016 Primary General	Category/ Type	Transaction ID: B4403F99C26784F909E0  Amount of Each Disbursement this Period  5000.00  Memo Item
State: CA District: 23  Full Name (Last, First, Middle Initial)  3. Leaders Only Unite (LOU PAC)  Mailing Address P.O. Box 2485  City Springfield  Purpose of Disbursement Contribution to Committee  Candidate Name  Office Sought: House Senate	other (specify)  tate Zip Code VA 22152-0485  ent For: 2016 Primary General Other (specify)  Other2016	Category/ Type	Date of Disbursement  M M M / P P / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Full Name (Last, First, Middle Initial)  C. Martha Roby for Congress  Mailing Address P.O. Box 195  City S  Montgomery Purpose of Disbursement Contribution to Committee  Candidate Name Rep. Martha Roby  Office Sought: House Senate  Disbursement	tate Zip Code AL 36101-0195	Category/ Type	Date of Disbursement  M M / 2016  Transaction ID: BBE31154097D24E8F97F  Amount of Each Disbursement this Period  2000.00  Memo Item
SUBTOTAL of Disbursements This Page (optional)  TOTAL This Period (last page this line number only).			10000.00

SCHEDULE B (FEC Form 3X)	Use separate schedule(s)	FOR LINE (check only	NUMBER: PAGE 54 OF 59	
ITEMIZED DISBURSEMENTS	for each category of the Detailed Summary Page	21b	22 X 23 24 25 26 29 30b	
Any information copied from such Reports and Sta or for commercial purposes, other than using the r				
NAME OF COMMITTEE (In Full)  National Association of Mutual In	•			
Full Name (Last, First, Middle Initial)				
A. Mike Bishop for Congress			Date of Disbursement	
Mailing Address P.O. Box 1148			03 17 2016	
City	State Zip Code		Transaction ID : BCDD316AD590C41A6A6	
Brighton Purpose of Disbursement	MI 48116-2748			
Contribution to Committee			Amount of Each Disbursement this Period	
Candidate Name		Category/	2000.00	
Michael D Bishop		Туре	2000.00	
Office Sought: House Disbur Senate President	sement For: 2016  ✓ Primary — General  Other (specify) ▼		Memo Item	
State: MI District: 08				
Full Name (Last, First, Middle Initial)				
B. Mike Bost for Congress			Date of Disbursement	
Mailing Address P.O. Box 1212			03 17 2016	
City Murphysboro	State Zip Code IL 62966-1212		Transaction ID : B860F2FE4EE904E0CA70	
Purpose of Disbursement Contribution to Committee			Amount of Each Disbursement this Period	
Candidate Name		Category/	1000.00	
Rep. Mike Bost		Type	1000.00	
	sement For: 2016  ✓ Primary General  Other (specify) ▼		Memo Item	
Full Name (Last, First, Middle Initial)				
C. People for Enterprise Trade and	Economic Growth (PE	TE PAC)	Date of Disbursement	
Mailing Address 7804 Evening Lane			03 17 2016	
City Alexandria	State Zip Code VA 22306-2754		Transaction ID : B4A284D571C7A4D769F2	
Purpose of Disbursement Contribution to Committee				
Candidate Name		Category/	Amount of Each Disbursement this Period 1500.00	
Office Sought:  House Senate President State: District:	sement For: 2016 Primary General Other (specify)  Other2016	Туре	Memo Item	
	55.2510			
SUBTOTAL of Disbursements This Page (optiona	)		4500.00	
TOTAL This Period (last page this line number or				

SCHEDULE B (FEC Form 3X)	Use separate schedule(s)	FOR LINE	•
ITEMIZED DISBURSEMENTS	for each category of the Detailed Summary Page	(check only 21b 27	7 one) 22 X 23 24 25 26 28a 28b 28c 29 30b
Any information copied from such Reports and State or for commercial purposes, other than using the na			
NAME OF COMMITTEE (In Full)  National Association of Mutual Ins	surance Companies	PAC	
Full Name (Last, First, Middle Initial)			
A. Pioneer PAC			Date of Disbursement
Mailing Address 10 West Broadway Suite 500			03 17 2016
City Salt Lake City	State         Zip Code           UT         84101-2099		Transaction ID : BEA2AED905C404CCD82
Purpose of Disbursement Contribution to Committee			Amount of Each Disbursement this Period
Candidate Name		Category/ Type	5000.00
Office Sought: House Disburse Senate President	ement For: 2016 Primary General Other (specify) ▼		Memo Item
State: District:	Other2016		
Full Name (Last, First, Middle Initial)     Poliquin for Congress			Date of Disbursement
Mailing Address P.O Box 50			03 17 2016
City Oakland	State Zip Code ME 04963-0050		Transaction ID : BB331604F7A8D4307BEC
Purpose of Disbursement Contribution to Committee			Amount of Each Disbursement this Period
Candidate Name Rep. Bruce L. Poliquin		Category/ Type	1000.00
Office Sought:    House   Disburse	ement For: 2016 Primary		Memo Item
Full Name (Last, First, Middle Initial)  C. Portman for Senate Committee			Date of Disbursement
Mailing Address 9856 Archer Lane			03 17 2016
City Dublin	State Zip Code OH 43017		Transaction ID : B949C2080E1FF47749A7
Purpose of Disbursement Contribution to Committee Candidate Name		Catagory	Amount of Each Disbursement this Period
Sen. Rob J. Portman  Office Sought: House Disburse	ement For: 2016	Category/ Type	1000.00
Senate President State: OH District:	Primary General Other (specify) ▼		Memo Item
SUBTOTAL of Disbursements This Page (optional)			7000.00
TOTAL This Period (last page this line number only	y)	·····	

SCHEDULE B (FEC Form 3X)	Use separate schedule(s)	FOR LINE I	
ITEMIZED DISBURSEMENTS	for each category of the Detailed Summary Page	21b 27	22 X 23 24 25 26 28a 28b 28c 29 30b
Any information copied from such Reports and Statem or for commercial purposes, other than using the name			
NAME OF COMMITTEE (In Full)  National Association of Mutual Insu	ırance Companies P	PAC	
Full Name (Last, First, Middle Initial)  A. Ron Johnson for Senate Inc.			Date of Disbursement
Mailing Address 219 E Washington Ave Suite 101			03 29 2016
City S Oshkosh Purpose of Disbursement	State Zip Code WI 54901-5005		Transaction ID : B90AD7EA5CD294FFCAA
Contribution to Committee  Candidate Name		Category/	Amount of Each Disbursement this Period 500.00
Senate President	nent For: 2016  Primary General  Other (specify)	Type	Memo Item
State: WI District:  Full Name (Last, First, Middle Initial)  B. Ron Johnson for Senate Inc.  Mailing Address 219 E Washington Ave			Date of Disbursement  03 / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Oshkosh	State Zip Code WI 54901-5005		Transaction ID : B502017E065C949E58FF
X Senate	nent For: 2016 Primary	Category/ Type	Amount of Each Disbursement this Period 2000.00 Memo Item
Full Name (Last, First, Middle Initial)  C. Tim Scott for Senate			Date of Disbursement
Mailing Address 1405 Ashley River Road	7'- 0-1-		03 17 2016
Charleston Purpose of Disbursement Contribution to Committee	State Zip Code SC 29407-5305		Transaction ID: B0DD826D0BAF84B1E98  Amount of Each Disbursement this Period
	nent For: 2016 Primary General Other (specify)	Category/ Type	2000.00 Memo Item
SUBTOTAL of Disbursements This Page (optional)			4500.00
TOTAL This Period (last nage this line number only)			

TEMIZED DISBURSEMENTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE N (check only 21b 27	
Any information copied from such Reports and Statem or for commercial purposes, other than using the name NAME OF COMMITTEE (In Full)  National Association of Mutual Insu	e and address of any political	by any perso committee to	on for the purpose of soliciting contributions
Full Name (Last, First, Middle Initial)  Tom Reed for Congress  Mailing Address P.O. Box 10847			Date of Disbursement  M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Rochester Purpose of Disbursement Contribution to Committee  Candidate Name  Rep. Tom W. Reed II  Office Sought:  House Senate  Disbursem	tate Zip Code NY 14610-0847  The primary General Other (specify)	Category/ Type	Transaction ID : B680FDA4206E4478DB15  Amount of Each Disbursement this Period  1000.00  Memo Item
Cortez Purpose of Disbursement Contribution to Committee  Candidate Name  Rep. Scott R. Tipton  Office Sought:  House Senate  Disbursem	ent For: 2016 Primary General Other (specify)	Category/ Type	Date of Disbursement  03
Hood River Purpose of Disbursement Contribution to Committee  Candidate Name  Rep. Greg P. Walden  Office Sought:  House Senate  Disbursem	ent For: 2016 Primary General Other (specify)	Category/ Type	Date of Disbursement  M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
SUBTOTAL of Disbursements This Page (optional)  TOTAL This Period (last page this line number only).			4500.00

TEMIZED DISBURSEMENTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE I (check only 21b	one) 22 X 23 24 25 26
Any information copied from such Reports and Statem		by any perso	28a 28b 28c 29 30b
or for commercial purposes, other than using the nam			
NAME OF COMMITTEE (In Full)  National Association of Mutual Insu	rance Companies PA	/C	
Full Name (Last, First, Middle Initial)  1. Yoder for Congress, Inc.			Date of Disbursement
Mailing Address P.O. Box 26742			03 / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
•	tate Zip Code KS 66225-6742		Transaction ID : B1121CBD464C14BDBB18
Purpose of Disbursement Contribution to Committee  Candidate Name  Rep. Kevin W. Yoder		Category/ Type	Amount of Each Disbursement this Period
Senate President State: KS District: 03	nent For: 2016  Primary General  Other (specify) ▼		Memo Item
Full Name (Last, First, Middle Initial)  3. Young for Iowa, Inc.			Date of Disbursement
Mailing Address P.O. Box 162			03 09 2016
City S Van Meter Purpose of Disbursement Contribution to Committee	tate Zip Code IA 50261-0162		Transaction ID : B81CBD64145414AD794F
Candidate Name Rep. David E. Young		Category/ Type	Amount of Each Disbursement this Period  2000.00
Senate	nent For: 2016 Primary		Memo Item
Full Name (Last, First, Middle Initial)			Date of Disbursement
Mailing Address			
City	tate Zip Code		
Purpose of Disbursement			Amount of Each Disbursement this Period
Candidate Name		Category/ Type	
	nent For: Primary General Other (specify) ▼		Memo Item
SUBTOTAL of Disbursements This Page (optional)			3000.00
TOTAL This Period (last page this line number only).		·····•	80500.00

TEMIZED DISBURSEMENTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE N (check only 21b 27	
Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.  NAME OF COMMITTEE (In Full)  National Association of Mutual Insurance Companies PAC			
Full Name (Last, First, Middle Initial)  Larry Martin for S.C. Senate			Date of Disbursement
Mailing Address P.O. Box 247			03 29 2016
Pickens	State         Zip Code           SC         29671-0247		Transaction ID : BBE53DF6E4B714B71BF9
Purpose of Disbursement Contribution to Committee Candidate Name		Category/ Type	Amount of Each Disbursement this Period 500.00
Senate	nent For: 2016 Primary General Other (specify)  Other2016	.,,,,,	Memo Item
Full Name (Last, First, Middle Initial)  3. Mike Gambrell Special Senate Election			Date of Disbursement
Mailing Address 400 Filter Plant Road			03 09 2016
City  Honea Path  Purpose of Disbursement  Special Election District 4	State Zip Code SC 29654-9129		Transaction ID : BC5C2A439E13E40C2B4D  Amount of Each Disbursement this Period
Candidate Name		Category/ Type	500.00
Senate	nent For: 2016 Primary General Other (specify)  Other2016	7,50	Memo Item
Full Name (Last, First, Middle Initial)			Date of Disbursement
Mailing Address			
,	State Zip Code		
		Category/ Type	Amount of Each Disbursement this Period
	nent For: Primary General Other (specify) ▼		Memo Item
SUBTOTAL of Disbursements This Page (optional)			1000.00
TOTAL This Period (last page this line number only)			